

<i>SERFF Tracking Number:</i>	<i>META-125488657</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38357</i>
<i>Company Tracking Number:</i>	<i>I07-39 2B</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual Long-Term Care Insurance Advertising</i>		
<i>Project Name/Number:</i>	<i>I07-39 2B/I07-39 2B</i>		

Filing at a Glance

Company: Metropolitan Life Insurance Company.

Product Name: Individual Long-Term Care SERFF Tr Num: META-125488657 State: ArkansasLH

Insurance Advertising

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed

State Tr Num: 38357

Sub-TOI: LTC03I.001 Qualified

Co Tr Num: I07-39 2B

State Status: Filed-Closed

Filing Type: Advertisement

Co Status:

Reviewer(s): Harris Shearer

Author: Mary Rinaldi

Disposition Date: 04/15/2008

Date Submitted: 02/21/2008

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date: 04/15/2008

State Filing Description:

General Information

Project Name: I07-39 2B

Status of Filing in Domicile: Authorized

Project Number: I07-39 2B

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/16/2008

State Status Changed: 04/16/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Re: Filing No. I07-39 2B

Metropolitan Life Insurance Company ("MetLife")

Individual Long-Term Care Insurance Advertising

NAIC Company No. 65978 - FEIN No. 13-5581829

Dear Sir/Madam:

SERFF Tracking Number: META-125488657 State: Arkansas
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357
Company Tracking Number: I07-39 2B
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Individual Long-Term Care Insurance Advertising
Project Name/Number: I07-39 2B/I07-39 2B

We enclose for filing electronic copies of the Individual long-term care advertising materials described below. The materials are intended for use with the following approved Individual long-term care policy form LTC2007.

The advertising materials are new and do not replace any materials previously filed with your Department.

Advertising Form Number Brief Description of Invitation to Inquire Advertising Material

ADF#1815.07 Multi-Life Split Billing Output - LifeStage Advantage
ADF#1817.07 Starter Split Billing Output - LifeStage Advantage
ADF#1816.07 Custom Split Billing Output - LifeStage Advantage

Variable material will be modified in accordance with the enclosed Explanation of Variables.

Please advise us of your action on this submission in accordance with your usual procedures.

If you have any questions or comments, please do not hesitate to contact me.

Sincerely,
Mary J. Rinaldi
Consultant-Compliance Marketing/AD

Company and Contact

Filing Contact Information

Mary Rinaldi, Consultant- Compliance mrinaldi@metlife.com
MKTG/AD
Green Farms Road (203) 221-3859 [Phone]
Westport, CT 06880

Filing Company Information

Metropolitan Life Insurance Company. CoCode: 65978 State of Domicile: New York

SERFF Tracking Number: *META-125488657* *State:* *Arkansas*
Filing Company: *Metropolitan Life Insurance Company.* *State Tracking Number:* *38357*
Company Tracking Number: *I07-39 2B*
TOI: *LTC03I Individual Long Term Care* *Sub-TOI:* *LTC03I.001 Qualified*
Product Name: *Individual Long-Term Care Insurance Advertising*
Project Name/Number: *I07-39 2B/I07-39 2B*

1MetLife Plaza Group Code: -99 Company Type: Life
Long Island City, NY 11101-4015 Group Name: State ID Number:
(111) 111-1111 ext. [Phone] FEIN Number: 13-5581829

SERFF Tracking Number: META-125488657 State: Arkansas
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357
Company Tracking Number: I07-39 2B
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Individual Long-Term Care Insurance Advertising
Project Name/Number: I07-39 2B/I07-39 2B

Filing Fees

Fee Required? Yes
Fee Amount: \$75.00
Retaliatory? No
Fee Explanation: \$25.00 per advertisement
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Life Insurance Company.	\$0.00	02/21/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
000895693	\$75.00	02/15/2008

SERFF Tracking Number: META-125488657 State: Arkansas
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357
Company Tracking Number: I07-39 2B
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Individual Long-Term Care Insurance Advertising
Project Name/Number: I07-39 2B/I07-39 2B

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Rosalind Minor (FM)	04/16/2008	04/16/2008
Filed-Closed	Harris Shearer	04/15/2008	04/16/2008

<i>SERFF Tracking Number:</i>	<i>META-125488657</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38357</i>
<i>Company Tracking Number:</i>	<i>I07-39 2B</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual Long-Term Care Insurance Advertising</i>		
<i>Project Name/Number:</i>	<i>I07-39 2B/I07-39 2B</i>		

Disposition

Disposition Date: 04/15/2008

Implementation Date: 04/15/2008

Status: Filed

Comment: Please ignore the previous Disposition. As you will note, it had the wrong year.

Rate data does NOT apply to filing.

SERFF Tracking Number: META-125488657 State: Arkansas
 Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357
 Company Tracking Number: I07-39 2B
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
 Product Name: Individual Long-Term Care Insurance Advertising
 Project Name/Number: I07-39 2B/I07-39 2B

Item Type	Item Name	Item Status	Public Access
Supporting Document	Explanation of variables	Filed-Closed	No
Supporting Document	cover letter	Filed-Closed	No
Supporting Document	NAIC Form	Filed-Closed	No
Form	Multi-Life Split Billing Output	Filed-Closed	Yes
Form	Starter Split Billing Output	Filed-Closed	Yes
Form	Custom Split Billing	Filed-Closed	Yes

<i>SERFF Tracking Number:</i>	<i>META-125488657</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38357</i>
<i>Company Tracking Number:</i>	<i>I07-39 2B</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual Long-Term Care Insurance Advertising</i>		
<i>Project Name/Number:</i>	<i>I07-39 2B/I07-39 2B</i>		

Disposition

Disposition Date: 04/18/2030

Implementation Date: 04/15/2008

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: META-125488657 State: Arkansas

Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357

Company Tracking Number: I07-39 2B

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Individual Long-Term Care Insurance Advertising

Project Name/Number: I07-39 2B/I07-39 2B

Item Type	Item Name	Item Status	Public Access
Supporting Document	Explanation of variables	Filed-Closed	No
Supporting Document	cover letter	Filed-Closed	No
Supporting Document	NAIC Form	Filed-Closed	No
Form	Multi-Life Split Billing Output	Filed-Closed	Yes
Form	Starter Split Billing Output	Filed-Closed	Yes
Form	Custom Split Billing	Filed-Closed	Yes

SERFF Tracking Number: META-125488657 State: Arkansas

Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357

Company Tracking Number: I07-39 2B

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: Individual Long-Term Care Insurance Advertising

Project Name/Number: I07-39 2B/I07-39 2B

Form Schedule

Lead Form Number: ADF#1815.07

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed	ADF#1815.07	Advertising	Multi-Life Split Billing Initial Output			0	ADF#1815.07 Multi-Life Split Billing Output.pdf
Filed-Closed	ADF#1817.07	Advertising	Starter Split Billing Initial Output			0	ADF#1817.07 Starter Split Billing Output.pdf
Filed-Closed	ADF#1816.07	Advertising	Custom Split Billing Initial Output			0	ADF#1816.07 Custom Split Billing Output.pdf

Multi-Life LTCI Proposal

[Product Name]

MetLife®



Prepared for: [BusinessName]

Prepared by: [Sample Agent]

 [200 Park Ave]
 [New York]
 [New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

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MetLife®

[LTC2007 Product Name]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during our lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If one or more of your employees needed assistance with the everyday activities of living such as dressing and bathing, it could have a significant impact on their families, their savings and their lifestyles. That's why offering your employees a plan for how they would pay for long-term care is an important benefit.

Who pays for long term care?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor's visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of lost income if a person becomes disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you've "**spent down**" virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- An individual's **personal savings and retirement accounts** are often the **only** available sources of payment.

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MetLife makes it easy to help protect what your employees value most.

Providing protection for your employees and their families from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer a straight-forward, easily customized insurance policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care at home.

You're one step closer to offering your employees a greater sense of security.

By inquiring about long-term care insurance, you've taken an important first step toward helping your employees feel more secure about their futures. MetLife LTC LifeStage Advantage offers the simplicity of an easy-to-understand policy along with the flexibility of two lifestage-based plans. Depending on their current life situation, your employees may want to take advantage of the ability to buy some coverage now and then add to it over time, or they may want to customize their coverage with optional inflation protection. Be sure to ask for more details about the plans and optional features that are available to your employees.

Relax. MetLife makes it easy to offer the security of a long-term care plan... so your employees don't have to worry about the uncertainties of tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

Your Group illustration at a glance

	[Plan 1]	[Plan 2]	Formatted: Font: 8 pt
			Formatted Table
Policy Benefits			
Plan Type:	[Custom]	[Custom]	
Total Benefit Amount	[\$400,000]	[\$400,000]	
Monthly Benefit Amount	[\$9,000]	[\$9,000]	
Billing Mode	[Monthly]	[Annual]	
[Partnership*]	[yes]	[yes]	
Every MetLife LTC LifeStage Advantage policy includes coverage for home care, assisted living facility, nursing home and adult day care, and they are reimbursed at 100% In addition, the following Built-In Benefits are also included.			
Built In Benefits			
Needs Assessment			
Return of Premium			
Policy Waiver of Premium			
International Coverage			
Hospice Facility/Hospice Care at Home			
Care Advisory Services			
Bed Reservation			
Elimination Period	[100] Calendar Days	[100] Calendar Days	
Benefit Increase Option	[5% Automatic Compound Inflation Rider]	[Future Purchase Option Rider]	
[Optional Benefits]			
[Optional Benefit #1]	[Shared Care Rider]	[Shared Care Rider]	
[Optional Benefit #2]	[Nonforfeiture Coverage Rider]	[Nonforfeiture Coverage Rider]	
[Optional Benefit #3]	[Cash Benefit Rider ^[1]]	[Cash Benefit Rider ^[1]]	
[Optional Benefit #4]	[Ten Year Premium Payment Rider ^[2]]	[Ten Year Premium Payment Rider ^[2]]	
[Discounts]			
[Multi-Life Discount]	[5% Employer Paid]	[5% Employer Paid]	
[Residential Discount]	[15%]	[15%]	
Split Billing Method:			Formatted: Font: 12 pt
[Core Method]	[Core benefits listed are employer paid]	[Core benefits listed are employer paid]	Formatted: Font: 10 pt
[Employer Contribution,]			Formatted: Font: 10 pt
[Dollar Amount Method]	[\$120.00][Monthly]	[\$120.00][Monthly]	
[Percent Method]	[50.00%]	[50.00%]	

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [13]].

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.]

[¹¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.]

[²]If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.]

Participants

	Name	Age	Discount	Plan 1 [Monthly] Employer Premium	Plan 1 Monthly Insured Premium	Plan 2 [Monthly] Employer Premium	Plan 2 Monthly Insured Premium
1.	[Sample Insured1]	[50]	[5%]	[\$153.81]	[\$52.29]	[\$89.41]	[\$51.69]
2.	[Sample Insured2]	[50]	[5%]	[\$153.81]	[\$52.29]	[\$89.41]	[\$51.69]
3.	[Sample Insured3]	[50]	[5%]	[\$153.81]	[\$52.29]	[\$89.41]	[\$51.69]
Total Premiums				[\$461.43]	[\$156.87]	[\$268.23]	[\$155.07]

				Plan 1	Plan 2
Total Annualized Employer Premium				[\$5,537.16]	[\$3,218.76]
Total Annualized Employee Premium				[\$1,882.44]	[\$1,860.84]
Total Annualized Premium				[\$7,419.60]	[\$5,079.60]

Premiums shown are for illustrative purposes only, and are subject to change. All premiums shown reflect the discount percentage listed above. Other discounts may be available.

Please note that paying your premiums more often than annually (i.e., once per year) results in higher yearly premium costs.

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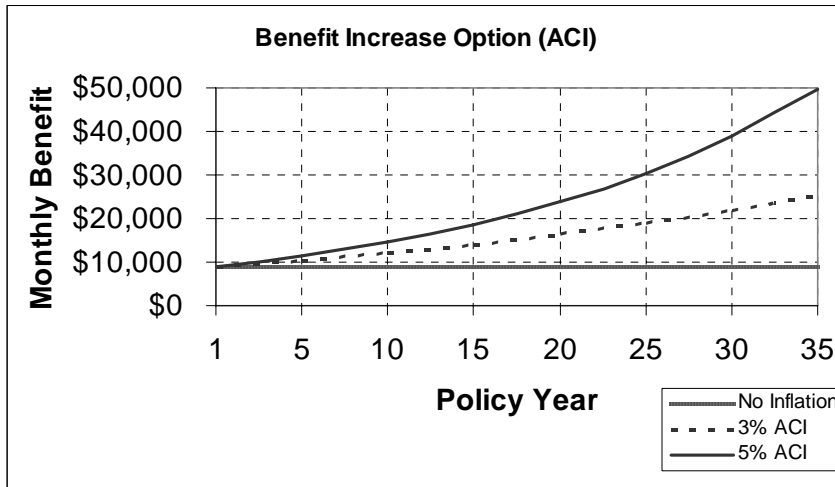
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Automatic Compound Inflation (ACI) Rider Comparison for [Plan1]

To illustrate how the different Benefit Increase Options work, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection, the 3% Automatic Compound Inflation (ACI) Rider, or the 5% Automatic Compound Inflation (ACI) Rider is selected.

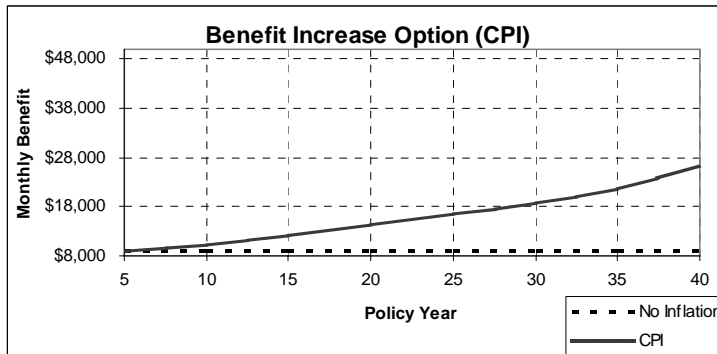
Year	No Benefit Increase Option		3% ACI		5% ACI	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	\$[9,000]	\$[400,000]	\$[9,000]	\$[400,000]	\$[9,000]	\$[400,000]
[5]	\$[9,000]	\$[400,000]	\$[10,433]	\$[463,709]	\$[11,486]	\$[510,512]
[10]	\$[9,000]	\$[400,000]	\$[12,095]	\$[537,566]	\$[14,660]	\$[651,557]
[15]	\$[9,000]	\$[400,000]	\$[14,021]	\$[623,186]	\$[18,710]	\$[831,571]
[20]	\$[9,000]	\$[400,000]	\$[16,255]	\$[722,444]	\$[23,879]	\$[1,061,319]
[25]	\$[9,000]	\$[400,000]	\$[18,844]	\$[837,511]	\$[30,477]	\$[1,354,541]
[30]	\$[9,000]	\$[400,000]	\$[21,845]	\$[970,904]	\$[38,897]	\$[1,728,776]
[35]	\$[9,000]	\$[400,000]	\$[25,324]	\$[1,125,544]	\$[49,644]	\$[2,206,406]



Urban Consumer Price Index (CPI) Rider Inflation Comparison for [Plan1]

To illustrate how the Consumer Price Index (CPI) Rider option works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be with Urban CPI inflation using hypothetical Urban CPI percentages.

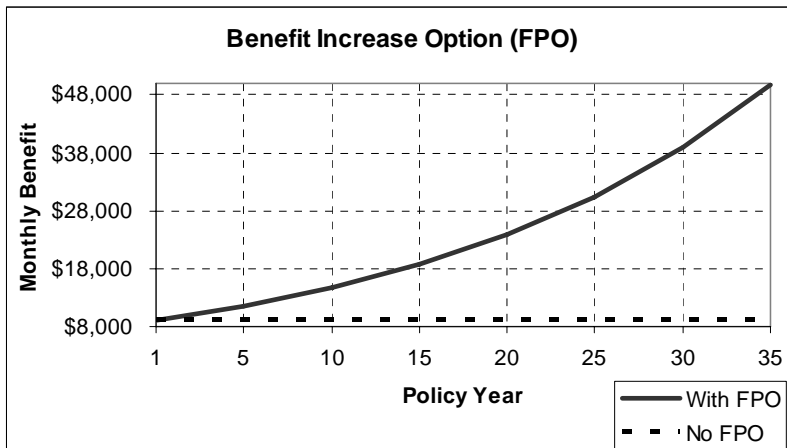
No Benefit Increase Option			Urban CPI		
Year	Monthly Benefit	Total Benefit Amount	CPI %	Monthly Benefit	Total Benefit Amount
[1]	\$[9,000]	\$[400,000]	[3]%	\$[9,000]	\$[400,000]
[5]	\$[9,000]	\$[400,000]	[2]%	\$[10,132]	\$[450,334]
[10]	\$[9,000]	\$[400,000]	[3]%	\$[12,206]	\$[542,531]
[15]	\$[9,000]	\$[400,000]	[3]%	\$[14,424]	\$[641,095]
[20]	\$[9,000]	\$[400,000]	[3]%	\$[16,398]	\$[728,843]
[25]	\$[9,000]	\$[400,000]	[3]%	\$[18,643]	\$[828,603]
[30]	\$[9,000]	\$[400,000]	[4]%	\$[21,610]	\$[960,487]
[35]	\$[9,000]	\$[400,000]	[2]%	\$[26,285]	\$[1,168,253]



Future Purchase Option (FPO) Rider Comparison for [Plan1]

To illustrate how the Future Purchase Option (FPO) Rider works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection or the FPO Rider is selected. The example below illustrates a policy that does not use a Benefit Increase Option and a policy that has it's Monthly and Total Benefit Amounts increased by 5% each year under the FPO Rider.

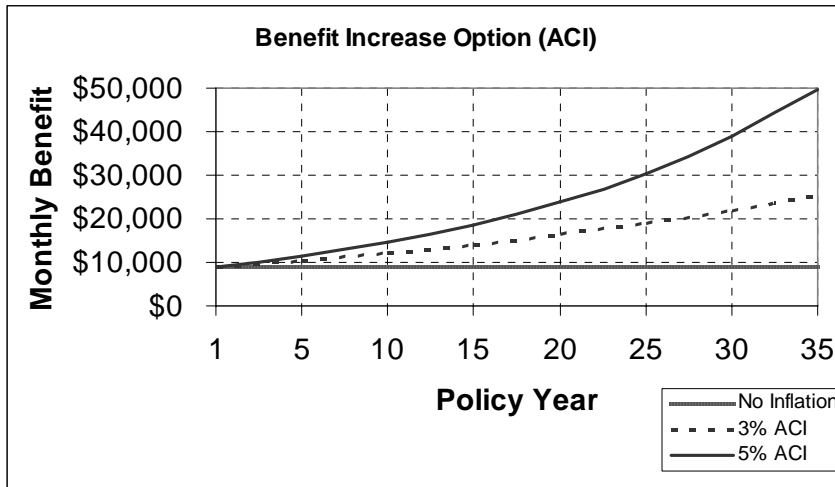
Policy Year	No Benefit Increase Option		Future Purchase	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	\$[9,000]	\$[400,000]	\$[9,000]	\$[400,000]
[5]	\$[9,000]	\$[400,000]	\$[11,486]	\$[510,512]
[10]	\$[9,000]	\$[400,000]	\$[14,660]	\$[651,557]
[15]	\$[9,000]	\$[400,000]	\$[18,710]	\$[831,571]
[20]	\$[9,000]	\$[400,000]	\$[23,879]	\$[1,061,319]
[25]	\$[9,000]	\$[400,000]	\$[30,477]	\$[1,354,541]
[30]	\$[9,000]	\$[400,000]	\$[38,897]	\$[1,728,776]
[35]	\$[9,000]	\$[400,000]	\$[49,644]	\$[2,206,406]



Automatic Compound Inflation (ACI) Rider Comparison for [Plan2]

To illustrate how the different Benefit Increase Options work, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection, the 3% Automatic Compound Inflation (ACI) Rider, or the 5% Automatic Compound Inflation (ACI) Rider is selected.

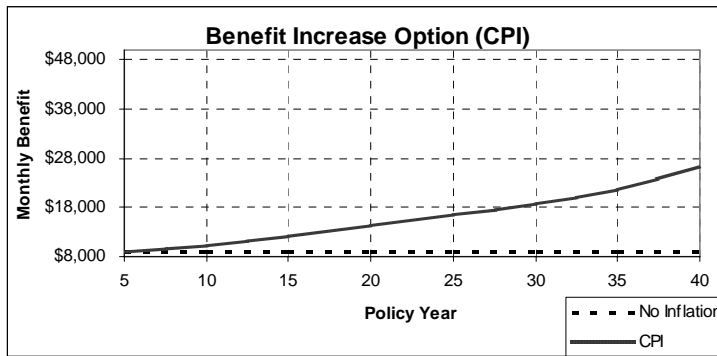
Year	No Benefit Increase Option		3% ACI		5% ACI	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	[\$9,000]	[\$400,000]	[\$9,000]	[\$400,000]	[\$9,000]	[\$400,000]
[5]	[\$9,000]	[\$400,000]	[\$10,433]	[\$463,709]	[\$11,486]	[\$510,512]
[10]	[\$9,000]	[\$400,000]	[\$12,095]	[\$537,566]	[\$14,660]	[\$651,557]
[15]	[\$9,000]	[\$400,000]	[\$14,021]	[\$623,186]	[\$18,710]	[\$831,571]
[20]	[\$9,000]	[\$400,000]	[\$16,255]	[\$722,444]	[\$23,879]	[\$1,061,319]
[25]	[\$9,000]	[\$400,000]	[\$18,844]	[\$837,511]	[\$30,477]	[\$1,354,541]
[30]	[\$9,000]	[\$400,000]	[\$21,845]	[\$970,904]	[\$38,897]	[\$1,728,776]
[35]	[\$9,000]	[\$400,000]	[\$25,324]	[\$1,125,544]	[\$49,644]	[\$2,206,406]



Urban Consumer Price Index (CPI) Rider Inflation Comparison for [Plan2]

To illustrate how the Consumer Price Index (CPI) Rider option works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be with Urban CPI inflation using hypothetical Urban CPI percentages.

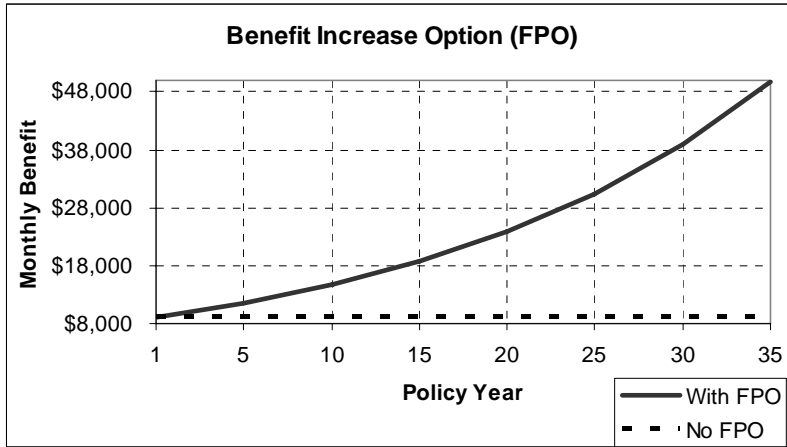
No Benefit Increase Option			Urban CPI		
Year	Monthly Benefit	Total Benefit Amount	CPI %	Monthly Benefit	Total Benefit Amount
[1]	\$[9,000]	\$[400,000]	[3]%	\$[9,000]	\$[400,000]
[5]	\$[9,000]	\$[400,000]	[2]%	\$[10,132]	\$[450,334]
[10]	\$[9,000]	\$[400,000]	[3]%	\$[12,206]	\$[542,531]
[15]	\$[9,000]	\$[400,000]	[3]%	\$[14,424]	\$[641,095]
[20]	\$[9,000]	\$[400,000]	[3]%	\$[16,398]	\$[728,843]
[25]	\$[9,000]	\$[400,000]	[3]%	\$[18,643]	\$[828,603]
[30]	\$[9,000]	\$[400,000]	[4]%	\$[21,610]	\$[960,487]
[35]	\$[9,000]	\$[400,000]	[2]%	\$[26,285]	\$[1,168,253]



Future Purchase Option (FPO) Rider Comparison for [Plan2]

To illustrate how the Future Purchase Option (FPO) Rider works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection or the FPO Rider is selected. The example below illustrates a policy that does not use a Benefit Increase Option and a policy that has it's Monthly and Total Benefit Amounts increased by 5% each year under the FPO Rider.

Policy Year	No Benefit Increase Option		Future Purchase	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	\$[9,000]	\$[400,000]	\$[9,000]	\$[400,000]
[5]	\$[9,000]	\$[400,000]	\$[11,486]	\$[510,512]
[10]	\$[9,000]	\$[400,000]	\$[14,660]	\$[651,557]
[15]	\$[9,000]	\$[400,000]	\$[18,710]	\$[831,571]
[20]	\$[9,000]	\$[400,000]	\$[23,879]	\$[1,061,319]
[25]	\$[9,000]	\$[400,000]	\$[30,477]	\$[1,354,541]
[30]	\$[9,000]	\$[400,000]	\$[38,897]	\$[1,728,776]
[35]	\$[9,000]	\$[400,000]	\$[49,644]	\$[2,206,406]



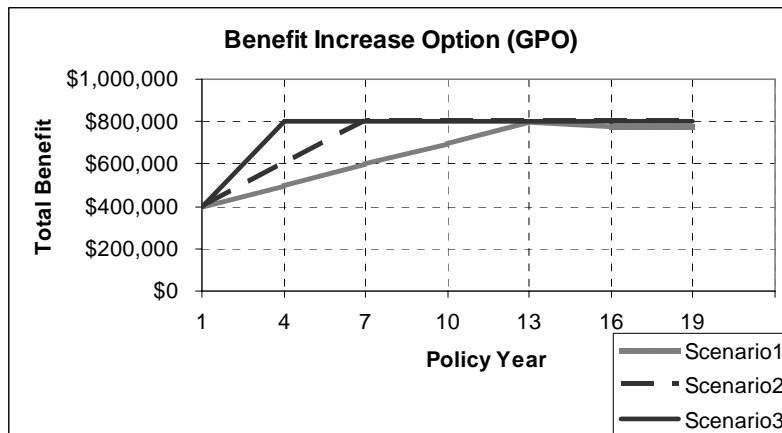
[Guaranteed Purchase Option (GPO) Rider Comparison for [Plan3]

To illustrate how the Guaranteed Purchase Option (GPO) Rider works, the table and graph below illustrate three possible scenarios for how you might choose to use the GPO*. Each scenario shows how the Monthly Benefits and Total Benefit Amounts would be affected. Scenario 1 assumes that a 25% increase is applied on the 3rd, 6th, 9th, and 12th policy anniversaries, Scenario 2 assumes that a 50% increase is applied on the 3rd and 6th policy anniversaries, while Scenario 3 assumes a one-time 100% increase on the 3rd policy anniversary.

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Year	GPO Scenario 1		GPO Scenario 2		GPO Scenario 3	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	\$[6,000]	\$[400,000]	\$[6,000]	\$[400,000]	\$[6,000]	\$[400,000]
[4]	\$[7,500]	\$[500,000]	\$[9,000]	\$[600,000]	\$[12,000]	\$[800,000]
[7]	\$[9,000]	\$[600,000]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]
[10]	\$[10,500]	\$[700,000]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]
[13]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]
[16]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]
[19]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]	\$[12,000]	\$[800,000]



*Under the GPO any increase must be at least 25% and the total of all increases may not exceed 100% of your initial total benefit amount.

[Policy Feature, Optional Rider, and Discounts Explanations

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy. Please refer to your Outline of Coverage for complete details.

Built In Benefits

Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.

Return of Premium

If you die on or before your 70th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.

Waiver of Premium

If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums

International Benefit

If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.

Care Advisory Services

This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.

Bed Reservation

If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.

Needs Assessment

After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.

Hospice Facility/Hospice Care at Home

This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.

Elimination Period for Covered Services

This policy includes a [100] calendar day elimination period for covered services. This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

[Benefit Increase Option]

[5% Automatic Compound Inflation Protection Rider]

[Automatically increases every year by 5%. There is no additional corresponding increase in premium due to the automatic benefit increases.]

[3% Automatic Compound Inflation Protection Rider]

[Automatically increases every year by 3%. There is no additional corresponding increase in premium due to the automatic benefit increases.]

[Future Purchase Option Rider]

[Automatically increases by 5% every year unless rejected in writing. Option ceases if you reject twice in a row. New premium price based on age when increase takes effect.]

[Urban CPI Compound Inflation Protection Rider]

[Automatically increases every year and is tied to the CPI. There is no additional corresponding increase in premium due to the automatic benefit increases.]

[Guaranteed Purchase Option Rider]

[As often as every 3 years, purchase an increase in coverage without providing proof of good health. Total purchases may be up to 100% of your original total benefit amount.]

[Optional Benefits]

[Shared Care Rider]

[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.]

[Nonforfeiture Rider]

[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.]

[Cash Benefit Rider]

[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long term care reimbursement (e.g. other policies and Medicare) must be aggregated.]

[Ten Year Premium Payment Rider]

MetLife®
[LTC2007 Product Name]

[With this rider, once you have paid premiums up to your 10th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to selecting an accelerated premium payment rider.]

[Discounts]

[Spousal Discount Rider]

[Premiums for your coverage will be subject to a [30]% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.]

[Marital Discount]

[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.]

[Residential Discount]

[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)]

[Preferred Discount]

[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]% discount on your premiums.]

[Multi-Life Discount]

[Employer Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Employer Paid – [10]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Voluntary Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

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For a full description of each of the features listed, please refer to the Outline of Coverage provided to you by your agent.

]

[
The [State] Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] qualify for the [State] Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as "Asset Disregard," under [State's] Medicaid program.

Asset Disregard means that an amount of the policyholder's assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured's eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person's eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife's individual long-term care insurance policies may now be offered to [State] residents as [State] Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:

[Insert State Specific Requirements]

What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] Department of Health and Welfare.]

]

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:]

- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;]
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;]
- [any injury or sickness that results from:]
 - any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;]
- [any care or services received outside of the United States, except as described in the International Benefit section;]
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law;]
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or]
- [services for which no charge is normally made in the absence of insurance.]

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

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- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or
- any motor vehicle no-fault law.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.]

[Coordination With Other MetLife Coverages

Prepared: [XX:XX:XX] [XX/XX/XXXX] V.[XX].[XXX] Page 17 of 18 For Presentation in: [XX]
ADF#1815.07 PEANUTS© United Feature Syndicate, Inc. L09078023[exp1208][All States][DC]

MetLife®

[LTC2007 Product Name]

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

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- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.]

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.

[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
- participation in a felony, riot or insurrection; or
- any intentionally self-inflicted injury;]

▲ Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

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▲ Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

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MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

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Individual LTCL Proposal

[Product Name]

MetLife®



New Graphic?

Prepared for: [Insured1 Name]
& [Insured2 Name]

Prepared by: [Sample Agent]

[200 Park Ave]
[New York]
[New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

MetLife®

[LTC2007 Product Name]

[Sample Insured]
[Sample Insured2]

Age: [45], [Standard]
[Age:][45][,][Standard]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during your lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If you needed assistance with some of the everyday activities of living such as dressing and bathing, it could have a significant impact on your family, your savings and your lifestyle. That’s why it’s important to have a plan for how you would pay for long-term care should the need arise.

How would you pay for long term care ?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor’s visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of your income if you become disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you’ve “**spent down**” virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- Your **retirement savings**, intended to support you and your family throughout your retirement years, may become the **only** available source of payment.

MetLife makes it easy to help protect what you value most.

Providing protection for you and your family from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer you a straight-forward policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care in your home.

You’re one step closer to designing a plan that fits your life.

By inquiring about long-term care insurance, you’ve taken an important first step toward creating a plan that protects your family, your finances and your choices for the future. Now, you can select a plan that best fits your needs and your budget. Depending on your situation, you may want to take advantage of the flexibility to buy some coverage now and then add to it over time. Be sure to ask about the Guaranteed Purchase Option and the other optional features that are available to you.

Relax. With MetLife, you have a plan that fits your life today... so you don’t have to worry about tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

Your [Plan Name] illustration at a glance

Policy Benefits	Initial Annual Premium
Total Benefit Amount	\$[400,000] \$[750.00]
Monthly Benefit Amount	\$[6,000]
[Partnership*]	[yes]

Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium Bed Reservation
 Policy Waiver of Premium Needs Assessment
 International Coverage Care Advisory Services
 Hospice Facility/Hospice Care at Home

Elimination Period [100] Calendar Days

[Benefit Increase Option]

[Guaranteed Purchase Option Rider] \$[975.00]

[Optional Benefits]

[Shared Care Rider] \$[100.00]
 [Nonforfeiture Coverage Rider] \$[100.00]
 [Cash Benefit Rider^[1]] \$[100.00]
 [Ten Year Premium Payment Rider^[2]] \$[1,487.50]

[Discounts]

[Spousal Discount Rider] -\$[637.50]
 [Marital Discount] -\$[637.50]
 [Residential Discount] -\$[637.50]
 [Preferred Discount] -\$[637.50]
 [Multi-Life Discount] -\$[100.00]

Total Initial Annual Premium[(with Discounts)]^[3] \$[1,487.50]

[Monthly] Modal Premium Amount \$[1,560.00]

[Total Annual Premium On and After 10th Policy Anniversary²] \$[0.00]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Split Billing Method:

[Core Method]

[Core benefits listed are employer paid.]

[Employer Contribution,]

[Dollar Amount Method]

[\$1,111.11][Monthly]

[Percent Method]

[50.00%]

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [6]].

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.]

[¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.]

[²] If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.]

[³] Please note that there is an additional cost if you pay premium more frequently than annually.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly] Premiums	Insured's Initial [Monthly] Premiums
Base Coverage	See above	\$[XXX.XX]	\$[XXX.XX]
Benefit Increase Option	[Future Purchase Option Rider]	\$[XX.XX]	\$[XX.XX]
[Shared Care Rider]	[Yes]	\$[XX.XX]	\$[XX.XX]
[Nonforfeiture Coverage Rider]	[Yes]	\$[XX.XX]	\$[XX.XX]
[Cash Benefit Rider ⁽¹⁾]	[Yes]	\$[XX.XX]	\$[XX.XX]
Total Modal Premium[(with Discounts)]		\$[XXX.XX]*	\$[XXX.XX]*

Employer Paid Portion is capped at \$[XXX.XX] Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the premium for the policy.]

Proposed Total Initial Premium

	Annual	Semi-Annual	Quarterly	Monthly
[Insured1]	\$[1,387.50]	\$[705.00]	\$[355.00]	\$[125.00]
[Insured2]	\$[1,387.50]	\$[705.00]	\$[355.00]	\$[125.00]
[Both Insureds]	\$[2,775.00]	\$[1,410.00]	\$[710.00]	\$[250.00]
Annualized Total Initial Premium	\$[2,775.00]	\$[2,820.00]	\$[2,840.00]	\$[3,000.00]

MetLife®

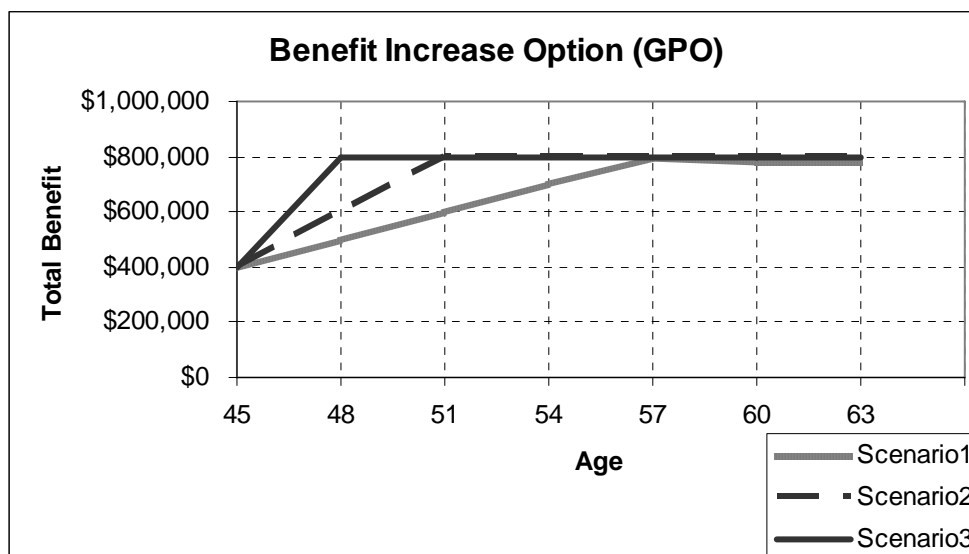
[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

[Guaranteed Purchase Option (GPO) Rider Comparison]

To help you understand how the Guaranteed Purchase Option (GPO) Rider works, the table and graph below illustrate three possible scenarios for how you might choose to use the GPO*. Each scenario shows how your Monthly Benefit, Total Benefit Amount, and Premiums** would be affected. Scenario 1 assumes that a 25% increase is applied on the 3rd, 6th, 9th and 12th policy anniversaries, Scenario 2 assumes that a 50% increase is applied on the 3rd and 6th policy anniversaries, while Scenario 3 assumes a one-time 100% increase on the 3rd policy anniversary.

Age	GPO Scenario 1			GPO Scenario 2			GPO Scenario 3		
	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[6,000]	\$[400,000]	\$[1,800]	\$[6,000]	\$[400,000]	\$[1,800]	\$[6,000]	\$[400,000]	\$[1,800]
[48]	\$[7,500]	\$[500,000]	\$[2,250]	\$[9,000]	\$[600,000]	\$[2,700]	\$[12,000]	\$[800,000]	\$[3,600]
[51]	\$[9,000]	\$[600,000]	\$[2,812]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[54]	\$[10,500]	\$[700,000]	\$[3,516]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[57]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[60]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[63]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]



*Under the GPO any increase must be at least 25% and the total of all increases may not exceed 100% of your initial total benefit amount.

**Illustration of Future Premium assumes no increase in rates]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Policy Feature, Optional Rider, and Discounts Explanations]

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy. Please refer to your Outline of Coverage for complete details.

Built In Benefits
Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.
Return of Premium
If you die on or before your 70 th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.
Waiver of Premium
If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums ..
International Benefit
If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.
Care Advisory Services
This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.
Bed Reservation
If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.
Needs Assessment
After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.
Hospice Facility/Hospice Care at Home
This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.
Elimination Period for Covered Services
This policy includes a [100] calendar day elimination period for covered services This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Benefit Increase Option]
[Guaranteed Purchase Option Rider]
[As often as every 3 years, purchase an increase in coverage without providing proof of good health. Total purchases may be up to 100% of your original total benefit amount.]
[Optional Benefits]
[Shared Care Rider]
[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.]
[Nonforfeiture Rider]
[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.]
[Cash Benefit Rider]
[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludible amount, proceeds from all sources of long term care reimbursement (e.g. other policies and Medicare) must be aggregated.]
[Ten Year Premium Payment Rider]
[With this rider, once you have paid premiums up to your 10 th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to selecting an accelerated premium payment rider.]
[Discounts]
[Spousal Discount Rider]
[Premiums for your coverage will be subject to a [30]% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.]
[Marital Discount]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.]

[Residential Discount]

[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)]

[Preferred Discount]

[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]% discount on your premiums.]

[Multi-Life Discount]

[Employer Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Employer Paid – [10]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Voluntary Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

[
The [State] Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] qualify for the [State] Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as “Asset Disregard,” under [State’s] Medicaid program.

Asset Disregard means that an amount of the policyholder’s assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured’s eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person’s eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife’s individual long-term care insurance policies may now be offered to [State] residents as [State] Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:

[Insert State Specific Requirements]

What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change.. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] Department of Health and Welfare.]

]

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
		Total Initial Annual Premium: \$[1,487.50]

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:]

- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;]
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;]
- [any injury or sickness that results from:]
 - any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services; and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;]
- [any care or services received outside of the United States, except as described in the International Coverage section;]
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law or to Benefits paid under the International Benefit section;]
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or]
- [services for which no charge is normally made in the absence of insurance.]

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or
- any motor vehicle no-fault law.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.]

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

[Coordination With Other MetLife Coverages

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.]

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.

[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
- participation in a felony, riot or insurrection; or
- any intentionally self-inflicted injury;]

Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

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Individual LTCI Proposal

Product Name

MetLife®



Prepared for: [Insured1 Name]
& [Insured2 Name]

Prepared by: [Sample Agent]

[200 Park Ave]
[New York]
[New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

MetLife®

[LTC2007 Product Name]

[Sample Insured]
[Sample Insured2]

Age: [45], [Standard]
[Age:][45][,][Standard]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during your lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If you needed assistance with some of the everyday activities of living such as dressing and bathing, it could have a significant impact on your family, your savings and your lifestyle. That’s why it’s important to have a plan for how you would pay for long-term care should the need arise.

How would you pay for long-term care?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor’s visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of your income if you become disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you’ve “**spent down**” virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- Your **retirement savings**, intended to support you and your family throughout your retirement years, may become the **only** available source of payment.

MetLife makes it easy to help protect what you value most.

Providing protection for you and your family from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer you a straight-forward, easily customized insurance policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care in your home.

You’re one step closer to designing a plan that fits your life.

By inquiring about long-term care insurance, you’ve taken an important first step toward creating a plan that protects your family, your finances and your choices for the future. Now, you can select the plan that best fits your needs and your budget. Depending on your situation, you may want to take advantage of the ability to customize your coverage with optional inflation protection. Be sure to ask about the Benefit Increase Options and the other optional features that are available to you.

Relax. With MetLife, you have a plan that fits your life today... so you don’t have to worry about tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

Your [Plan Name] illustration at a glance:

Policy Benefits

Initial Annual Premium

Total Benefit Amount	\$[400,000]	\$[750.00]
Monthly Benefit Amount	\$[9,000]	
[Partnership*]	[yes]	

Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium	Bed Reservation
Policy Waiver of Premium	Needs Assessment
International Coverage	Care Advisory Services
Hospice Facility/ Hospice Care at Home	

Elimination Period	[100] Calendar Days
--------------------	---------------------

[Benefit Increase Option]

[5% Automatic Compound Inflation Rider]	\$[975.00]
[3% Automatic Compound Inflation Rider]	\$[975.00]
[Future Purchase Option Rider]	\$[975.00]
[Urban CPI Compound Inflation Protection Rider]	\$[975.00]

[Optional Benefits]

[Shared Care Rider]	\$[100.00]
[Nonforfeiture Coverage Rider]	\$[100.00]
[Cash Benefit Rider ^[1]]	\$[100.00]
[Ten Year Premium Payment Rider ^[2]]	\$[1,275.00]

[Discounts]

[Spousal Discount]	-\$[637.50]
[Marital Discount]	-\$[637.50]
[Residential Discount]	-\$[637.50]
[Preferred Discount]	-\$[637.50]
[Multi-Life Discount]	-\$[100.00]

Total Initial Annual Premium[(with Discounts)]^[3]	\$[1,275.00]
--	---------------------

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

[Monthly] Modal Premium Amount \$[115.00]

[Total Annual Premium On and After 10th Policy Anniversary²] \$[0.00]

Split Billing Method:

[Core Method]	[Core benefits listed are employer paid.]
[Employer Contribution,]	
[Dollar Amount Method]	[\$1,111.11][Monthly]
[Percent Method]	[50.00%]

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [9]].

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.]

[¹ Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.]

[² If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.]

[³ Please note that there is an additional cost if you pay premium more frequently than annually.]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

[Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly] Premiums	Insured's Initial [Monthly] Premiums
Base Coverage	See above	\$[XXX.XX]	\$[XXX.XX]
Benefit Increase Option	[Future Purchase Option Rider]	\$[XX.XX]	\$[XX.XX]
[Shared Care Rider]	[Yes]	\$[XX.XX]	\$[XX.XX]
[Nonforfeiture Coverage Rider]	[Yes]	\$[XX.XX]	\$[XX.XX]
[Cash Benefit Rider ⁽¹⁾]	[Yes]	\$[XX.XX]	\$[XX.XX]
Total Modal Premium[(with Discounts)]		\$[XXX.XX]*	\$[XXX.XX]*

Employer Paid Portion is capped at \$[XXX.XX] Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the premium for the policy.]

[Proposed Total Initial Premium

	Annual	Semi-Annual	Quarterly	Monthly
[Insured1]	\$[1,387.50]	\$[705.00]	\$[355.00]	\$[125.00]
[Insured2]	\$[1,387.50]	\$[705.00]	\$[355.00]	\$[125.00]
[Both Insureds]	\$[2,775.00]	\$[1,410.00]	\$[710.00]	\$[250.00]
Annualized Total Initial Premium	\$[2,775.00]	\$[2,820.00]	\$[2,840.00]	\$[3,000.00]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,275.00]

Automatic Compound Inflation (ACI) Rider Comparison

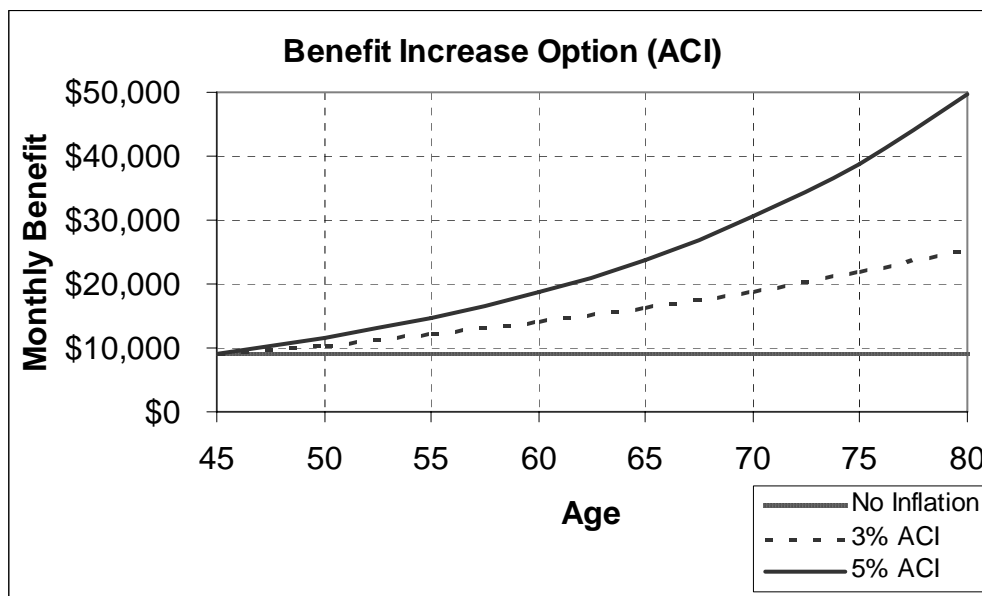
To help you understand how the different Benefit Increase Options work, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount, and Premium* would be if you chose No Benefit Increase Option, the 3% Automatic Compound Inflation (ACI) Rider, or the 5% Automatic Compound Inflation (ACI) Rider.

No Benefit Increase Option

3% ACI

5% ACI

Age	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[1,800]	\$[9,000]	\$[400,000]	\$[2,000]	\$[9,000]	\$[400,000]	\$[2,200]
[50]	\$[9,000]	\$[400,000]	\$[1,800]	\$[10,433]	\$[463,709]	\$[2,000]	\$[11,486]	\$[510,512]	\$[2,200]
[55]	\$[9,000]	\$[400,000]	\$[1,800]	\$[12,095]	\$[537,566]	\$[2,000]	\$[14,660]	\$[651,557]	\$[2,200]
[60]	\$[9,000]	\$[400,000]	\$[1,800]	\$[14,021]	\$[623,186]	\$[2,000]	\$[18,710]	\$[831,571]	\$[2,200]
[65]	\$[9,000]	\$[400,000]	\$[1,800]	\$[16,255]	\$[722,444]	\$[2,000]	\$[23,879]	\$[1,061,319]	\$[2,200]
[70]	\$[9,000]	\$[400,000]	\$[1,800]	\$[18,844]	\$[837,511]	\$[2,000]	\$[30,477]	\$[1,354,541]	\$[2,200]
[75]	\$[9,000]	\$[400,000]	\$[1,800]	\$[21,845]	\$[970,904]	\$[2,000]	\$[38,897]	\$[1,728,776]	\$[2,200]
[80]	\$[9,000]	\$[400,000]	\$[1,800]	\$[25,324]	\$[1,125,544]	\$[2,000]	\$[49,644]	\$[2,206,406]	\$[2,200]



*Illustration of Future Premium assumes no increase in rates]

MetLife®

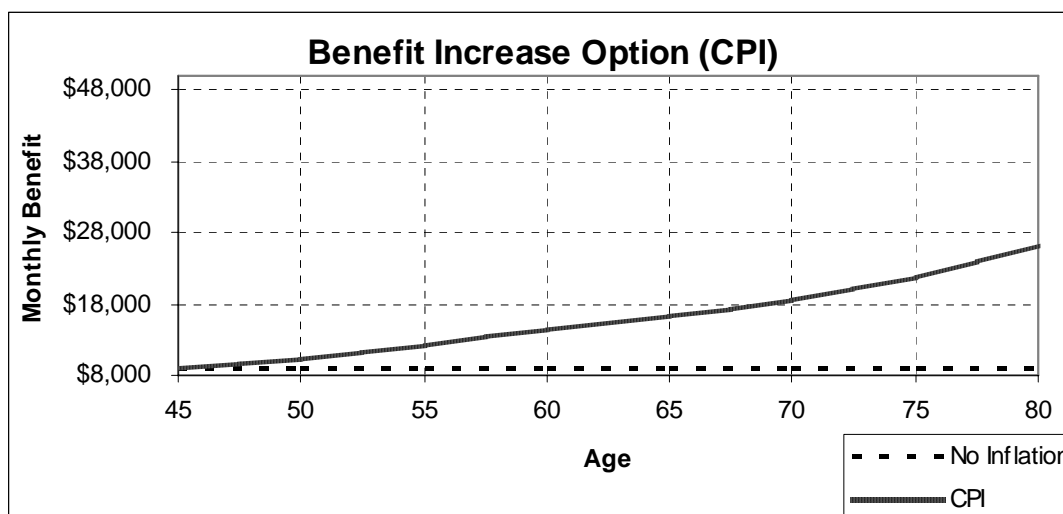
[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,275.00]

[Urban Consumer Price Index (CPI) Rider Inflation Comparison

To help you understand how the Consumer Price Index (CPI) Rider option works, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount, and Premium* would be with Urban CPI inflation using hypothetical Urban CPI percentages.

Age	No Benefit Increase Option			Urban CPI			
	Monthly Benefit	Total Benefit Amount	Premium	CPI %	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[9,000]	\$[400,000]	\$[2,200]
[50]	\$[9,000]	\$[400,000]	\$[2,000]	[2]%	\$[10,132]	\$[450,334]	\$[2,200]
[55]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[12,206]	\$[542,531]	\$[2,200]
[60]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[14,424]	\$[641,095]	\$[2,200]
[65]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[16,398]	\$[728,843]	\$[2,200]
[70]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[18,643]	\$[828,603]	\$[2,200]
[75]	\$[9,000]	\$[400,000]	\$[2,000]	[4]%	\$[21,610]	\$[960,487]	\$[2,200]
[80]	\$[9,000]	\$[400,000]	\$[2,000]	[2]%	\$[26,285]	\$[1,168,253]	\$[2,200]



*Illustration of Future Premium assumes no increase in rates

MetLife®

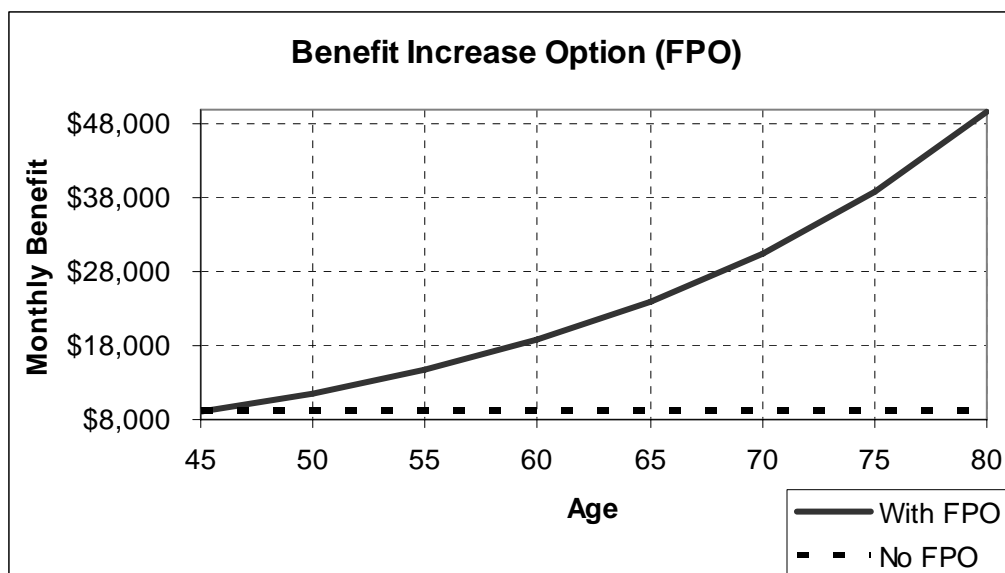
[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,275.00]

Future Purchase Option (FPO) Rider Comparison

To help you understand how the Future Purchase Option (FPO) Rider works, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount and Premium* would be if you chose No Benefit Increase Option or the Future Purchase Option. The example below assumes all increases are accepted.

Age	No Benefit Increase Option			Future Purchase		
	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[1,800]	\$[9,000]	\$[400,000]	\$[1,800]
[50]	\$[9,000]	\$[400,000]	\$[1,800]	\$[11,486]	\$[510,512]	\$[2,297]
[55]	\$[9,000]	\$[400,000]	\$[1,800]	\$[14,660]	\$[651,557]	\$[2,932]
[60]	\$[9,000]	\$[400,000]	\$[1,800]	\$[18,710]	\$[831,571]	\$[3,742]
[65]	\$[9,000]	\$[400,000]	\$[1,800]	\$[23,879]	\$[1,061,319]	\$[4,775]
[70]	\$[9,000]	\$[400,000]	\$[1,800]	\$[30,477]	\$[1,354,541]	\$[6,095]
[75]	\$[9,000]	\$[400,000]	\$[1,800]	\$[38,897]	\$[1,728,776]	\$[7,779]
[80]	\$[9,000]	\$[400,000]	\$[1,800]	\$[49,644]	\$[2,206,406]	\$[9,928]



*Illustration of Future Premium assumes no increase in rates

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

[Policy Feature, Optional Rider, and Discount, Explanations]

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy.. Please refer to your Outline of Coverage for complete details.

Built In Benefits
Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.
Return of Premium
If you die on or before your 70 th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.
Waiver of Premium
If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums .
International Benefit
If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.
Care Advisory Services
This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.
Bed Reservation
If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.
Needs Assessment
After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.
Hospice Facility/Hospice Care at Home
This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.
Elimination Period for Covered Services
This policy includes a [100] calendar day elimination period for covered services This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

[Benefit Increase Option]
[5% Automatic Compound Inflation Protection Rider]
[Automatically increases every year by 5%. There is no additional corresponding increase in premium due to the automatic benefit increases..]
[3% Automatic Compound Inflation Protection Rider]
[Automatically increases every year by 3%. There is no additional corresponding increase in premium due to the automatic benefit increases.]
[Future Purchase Option Rider]
[Automatically increases by 5% every year unless rejected in writing. Option ceases if you reject twice in a row. New premium price based on age when increase takes effect.]
[Urban CPI Compound Inflation Protection Rider]
[Automatically increases every year and is tied to the CPI. There is no additional corresponding increase in premium due to the automatic benefit increases.]
[Optional Benefits]
[Shared Care Rider]
[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.]
[Nonforfeiture Rider]
[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.]
[Cash Benefit Rider]
[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludible amount, proceeds from all sources of long term care reimbursement (e.g. other policies and Medicare) must be aggregated.]
[Ten Year Premium Payment Rider]
[With this rider, once you have paid premiums up to your 10 th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

selecting an accelerated premium payment rider.]

[Discounts]

[Spousal Discount Rider]

[Premiums for your coverage will be subject to a [30]% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.]

[Marital Discount]

[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.]

[Residential Discount]

[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)]

[Preferred Discount]

[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]% discount on your premiums.]

[Multi-Life Discount]

[Employer Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Employer Paid – [10]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

[Voluntary Paid – [5]% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,275.00]	

[
The [State] Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] qualify for the [State] Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as “Asset Disregard,” under [State’s] Medicaid program.

Asset Disregard means that an amount of the policyholder’s assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured’s eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person’s eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife’s individual long-term care insurance policies may now be offered to [State] residents as [State] Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:
[Insert State Specific Requirements]

What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] Department of Health and Welfare.]

]

MetLife®
[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,275.00]

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:]

- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;]
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;]
- [any injury or sickness that results from:]
 - any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services; and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;]
- [any care or services received outside of the United States, except as described in the International Benefit section;]
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law;]
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or]
- [services for which no charge is normally made in the absence of insurance.]

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or
- any motor vehicle no-fault law.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.]

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,275.00]	

[Coordination With Other MetLife Coverages]

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.]

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.

[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
- participation in a felony, riot or insurrection; or
- any intentionally self-inflicted injury;]

Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

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The information contained in this document is not intended to (and cannot) be used by anyone to avoid IRS penalties. This document supports the promotion and marketing of this long term care. You should seek advice based on your particular circumstances from an independent tax advisor.

MetLife, its agents, and representatives may not give legal or tax advice. Any discussion of taxes herein or related to this document is for general information purposes only and does not purport to be complete or cover every situation. Tax law is subject to interpretation and legislative change. Tax results and the appropriateness of any product for any specific taxpayer may vary depending on the facts and circumstances. You should consult with and rely on your own independent legal and tax advisers regarding your particular sets of facts and circumstances.

<i>SERFF Tracking Number:</i>	<i>META-125488657</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38357</i>
<i>Company Tracking Number:</i>	<i>I07-39 2B</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual Long-Term Care Insurance Advertising</i>		
<i>Project Name/Number:</i>	<i>I07-39 2B/I07-39 2B</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: META-125488657 State: Arkansas
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38357
Company Tracking Number: I07-39 2B
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Individual Long-Term Care Insurance Advertising
Project Name/Number: I07-39 2B/I07-39 2B

Supporting Document Schedules

	Review Status:	
Satisfied -Name: Explanation of variables	Filed-Closed	04/16/2008
Comments: EOVs are enclosed.		
Attachments: EOV ADF#1815.07 Multi-Life Split Billing Output .pdf EOV ADF#1816.07 Custom Split Billing Output.pdf EOV ADF#1817.07 Starter Split Billin Output.pdf		
	Review Status:	
Satisfied -Name: cover letter	Filed-Closed	04/16/2008
Comments: The submission cover letter is enclosed.		
Attachment: AR_I_Filing Letter .pdf		
	Review Status:	
Satisfied -Name: NAIC Form	Filed-Closed	04/16/2008
Comments: The NAIC Form is enclosed.		
Attachment: AR _ NAIC_Individual.pdf		

Multi-Life LTCI Proposal

[Product Name]The name of the product will print here

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MetLife®



Prepared for: [BusinessName]

Prepared by: [Sample Agent]

[200 Park Ave]
[New York]
[New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

The table above will show the client and agent information as entered in the GUI as well as the date and time that the illustration was prepared.

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MetLife®

[LTC2007 Product Name]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during our lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If one or more of your employees needed assistance with the everyday activities of living such as dressing and bathing, it could have a significant impact on their families, their savings and their lifestyles. That's why offering your employees a plan for how they would pay for long-term care is an important benefit.

Who pays for long term care?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor's visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of lost income if a person becomes disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you've "**spent down**" virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- An individual's **personal savings and retirement accounts** are often the **only** available sources of payment.

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MetLife makes it easy to help protect what your employees value most.

Providing protection for your employees and their families from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer a straight-forward, easily customized insurance policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care at home.

You're one step closer to offering your employees a greater sense of security.

By inquiring about long-term care insurance, you've taken an important first step toward helping your employees feel more secure about their futures. MetLife LTC LifeStage Advantage offers the simplicity of an easy-to-understand policy along with the flexibility of two lifestage-based plans. Depending on their current life situation, your employees may want to take advantage of the ability to buy some coverage now and then add to it over time, or they may want to customize their coverage with optional inflation protection. Be sure to ask for more details about the plans and optional features that are available to your employees.

Relax. MetLife makes it easy to offer the security of a long-term care plan... so your employees don't have to worry about the uncertainties of tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

Your Group illustration at a glance

The second column in this table will only print if there is a second plan being illustrated and shows the same information as the first but pertaining to the selections made for the second plan.

	[Plan 1]	[Plan 2]
Policy Benefits		
Plan Type:	[Custom]The type of plan selected, Custom or Simple will print here.	[Custom]
Total Benefit Amount	[\$400,000] The total benefit amount selected will print here.	[\$400,000]
Monthly Benefit Amount	[\$9,000]The monthly benefit amount selected will print here.	[\$9,000]
Billing Mode	[Monthly]The billing mode selected will print here.	[Annual]
[Partnership*]	[yes]This entire row will only print if there is at least one partnership plan being illustrated. Yes or No will indicate which plan is the partnership.	[yes]

Every MetLife LTC LifeStage Advantage policy includes coverage for home care, assisted living facility, nursing home and adult day care, and they are reimbursed at 100% In addition, the following Built-In Benefits are also included.

Built In Benefits

Needs Assessment
Return of Premium
Policy Waiver of Premium
International Coverage
Hospice Facility/Hospice Care at Home
Care Advisory Services
Bed Reservation
Elimination Period

[100]This is the number of days in the elimination period Calendar Days

[100] Calendar Days

Benefit Increase Option

[5% Automatic Compound Inflation Rider]This is the Benefit Increase Option selected, if none has been selected for any plan being illustrated then this row will not print.

[Future Purchase Option Rider]

[Optional Benefits]

The following section will only print if there is at least one optional benefit selected for one of the plans being illustrated. Each individual benefit will be printed on it's own line if selected and if the benefit was chosen for one plan and not the other then N/A will print where it's name would have printed in the column for the plan that does not have the rider.

[Optional Benefit #1]

[Shared Care Rider]

[Shared Care Rider]

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[LTC2007 Product Name]

[Optional Benefit #2]	[Nonforfeiture Coverage Rider]	[Nonforfeiture Coverage Rider]
[Optional Benefit #3]	[Cash Benefit Rider ⁽¹⁾]	[Cash Benefit Rider ⁽¹⁾]
[Optional Benefit #4]	[Ten Year Premium Payment Rider ⁽²⁾]	[Ten Year Premium Payment Rider ⁽²⁾]

[Discounts]

[Multi-Life Discount] If there is a multi-life discount being illustrated for at least one of the plans being illustrated then this row will print.

[5% Employer Paid]
The name of the multi-life discount being illustrated will print here, if there is no multi-life discount for this plan then "N/A" will print instead

[5% Employer Paid] The name of the multi-life discount being illustrated will print here, if there is no multi-life discount for this plan then "N/A" will print instead

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[Household Discount] If there is a household discount being illustrated for any of the plans being illustrated then this row will print.

[15% Residential] The name of the household discount being illustrated will print here, if there is no multi-life discount for this plan then "N/A" will print instead

[15% Marital] The name of the household discount being illustrated will print here, if there is no multi-life discount for this plan then "N/A" will print instead

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Split Billing Method:

[Core Method] If there is a core method split billing plan then this row will print.

[Core benefits listed are employer paid] This will not print if this plan is not a Core Method Split Billing plan.

[Core benefits listed are employer paid] This will not print if this is not a Core Method Split Billing plan.

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[Employer Contribution,] If this is not a core method split billing plan then this row will print.

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[Dollar Amount Method] If there is a Dollar Amount Method Split Billing plan then this row will print.

[\$120.00] [Monthly] The employers dollar amount contribution will print here as well as their billing mode if this is a Dollar Amount Method Split Billing plan.

[\$120.00] [Monthly] The employers dollar amount contribution will print here as well as their billing mode if this is a Dollar Amount Method Split Billing plan.

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[Percent Method] If there is a Percent Method Split Billing plan being illustrated then this row will print.

[50.00%] The employers percent contribution will print here if this is a Percent Method Split Billing plan.

[50.00%] The employers percent contribution will print here if this is a Percent Method Split Billing plan.

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MetLife®

[LTC2007 Product Name]

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [13]].The bracketed portion of the text will only print if the user is including the Optional Benefit Explanations pages with the output, the page number is the page that this section begins on.

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[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.]This only prints for partnership plans.

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^[1] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.]This only prints if the Cash Benefit Rider has been selected. Superscript number will correspond with the one that follows the Cash Benefit Rider line in the table above.

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^[2]If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.] This only prints if the Ten Year Premium Payment Rider has been selected. Superscript number will correspond with the one that follows the Ten Year Premium Payment line in the table above.

MetLife®

[LTC2007 Product Name]

Participants

	NameThe name if the insured will print in this column	AgeThe age for each insured will print in this column	DiscountTotal discount percentage for each insured will print in this column	Plan 1 [Monthly] This is the payment mode selected Employer Premium This column shows the Employers premium for each insured	Plan 1 Monthly Insured Premium This column shows each employee/insured's premium	Plan 2 [Monthly] This is the payment mode selected Employer Premium This column shows the Employers premium for each insured	Plan 2 Monthly Insured Premium This column shows each employee/insured's premium
1	[Sample Insured1]	[50]	[5%]	\$[153.81]	\$[52.29]	\$[89.41]	\$[51.69]
2	[Sample Insured2]	[50]	[5%]	\$[153.81]	\$[52.29]	\$[89.41]	\$[51.69]
3	[Sample Insured3]	[50]	[5%]	\$[153.81]	\$[52.29]	\$[89.41]	\$[51.69]
Total Premiums				\$[461.43] This is the employers total premium for all employee's for the first plan	\$[156.87] This is the employee's total premium for all employee's on the first plan	\$[268.23] This is the employers total premium for all employee's for the second plan	\$[155.07] This is the employee's total premium for all employee's on the second plan

Total Annualized Employer Premium	Plan 1 \$[5,537.16] Total Annualized Employer premium for the first plan	Plan 2 \$[3,218.76] Total Annualized Employer premium for the second plan
Total Annualized Employee Premium	\$[1,882.44] Total Annualized employee premium for the first plan	\$[1,860.84] Total Annualized employee premium for the second plan

Prepared: [XX:XX:XX] [XX/XX/XXXX] V.[XX].[XXX] Page 6 of 18 For Presentation in: [XX]
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[LTC2007 Product Name]

Total Annualized Premium	\$[7,419.60]Total Annualized premium for the first plan	\$[5,079.60]Total annualized premium for the second plan
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Premiums shown are for illustrative purposes only, and are subject to change. All premiums shown reflect the discount percentage listed above. Other discounts may be available.

Please note that paying your premiums more often than annually (i.e., once per year) results in higher yearly premium costs.

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[This page will only print either the 5% ACI rider or the 3% ACI rider has been selected.]

Automatic Compound Inflation (ACI) Rider Comparison for

[Plan2] This is the plan that the rider has been selected for.

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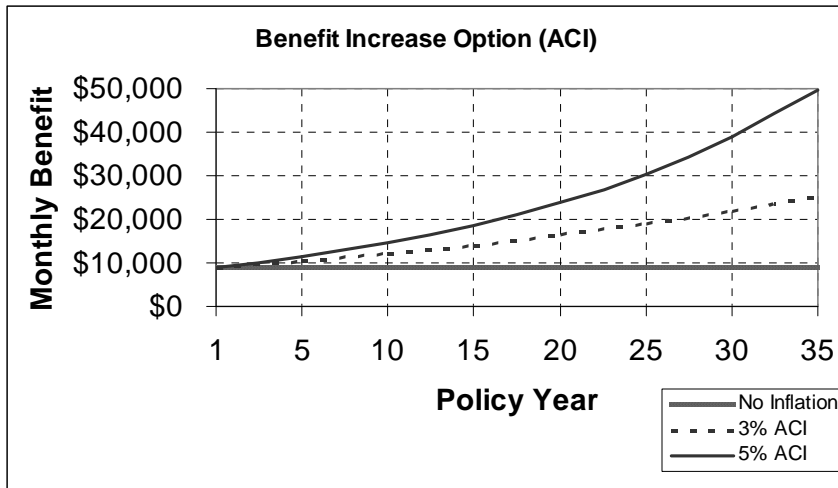
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To illustrate how the different Benefit Increase Options work, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection, the 3% Automatic Compound Inflation (ACI) Rider, or the 5% Automatic Compound Inflation (ACI) Rider is selected.

Year	No Benefit Increase Option		3% ACI		5% ACI	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	[\$9,000]	[\$400,000]	[\$9,000]	[\$400,000]	[\$9,000]	[\$400,000]
[5]	[\$9,000]	[\$400,000]	[\$10,433]	[\$463,709]	[\$11,486]	[\$510,512]
[10]	[\$9,000]	[\$400,000]	[\$12,095]	[\$537,566]	[\$14,660]	[\$651,557]
[15]	[\$9,000]	[\$400,000]	[\$14,021]	[\$623,186]	[\$18,710]	[\$831,571]
[20]	[\$9,000]	[\$400,000]	[\$16,255]	[\$722,444]	[\$23,879]	[\$1,061,319]
[25]	[\$9,000]	[\$400,000]	[\$18,844]	[\$837,511]	[\$30,477]	[\$1,354,541]
[30]	[\$9,000]	[\$400,000]	[\$21,845]	[\$970,904]	[\$38,897]	[\$1,728,776]
[35]	[\$9,000]	[\$400,000]	[\$25,324]	[\$1,125,544]	[\$49,644]	[\$2,206,406]

The table above shows how the monthly and total benefit amounts will increase with no benefit increase option, 3% ACI benefit increase option, and 5% ACI benefit increase option for the plan. The graph below plots these values.



]

[This page will only print if the Urban CPI benefit increase option has been selected.]

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Urban Consumer Price Index (CPI) Rider Inflation Comparison for [Plan2]

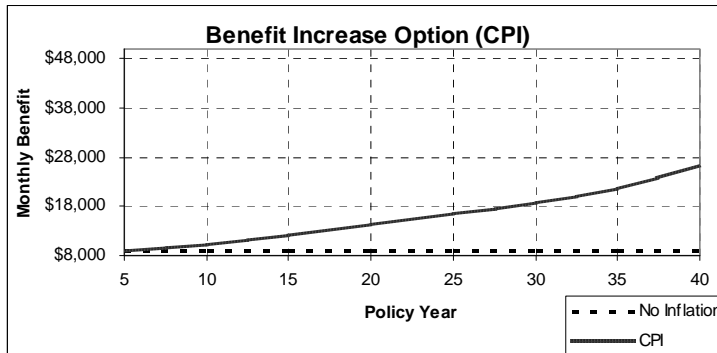
This is the plan that the rider was selected for.

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To illustrate how the Consumer Price Index (CPI) Rider option works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be with Urban CPI inflation using hypothetical Urban CPI percentages.

No Benefit Increase Option			Urban CPI		
Year	Monthly Benefit	Total Benefit Amount	CPI %	Monthly Benefit	Total Benefit Amount
[1]	[\$9,000]	[\$400,000]	[3]%	[\$9,000]	[\$400,000]
[5]	[\$9,000]	[\$400,000]	[2]%	[\$10,132]	[\$450,334]
[10]	[\$9,000]	[\$400,000]	[3]%	[\$12,206]	[\$542,531]
[15]	[\$9,000]	[\$400,000]	[3]%	[\$14,424]	[\$641,095]
[20]	[\$9,000]	[\$400,000]	[3]%	[\$16,398]	[\$728,843]
[25]	[\$9,000]	[\$400,000]	[3]%	[\$18,643]	[\$828,603]
[30]	[\$9,000]	[\$400,000]	[4]%	[\$21,610]	[\$960,487]
[35]	[\$9,000]	[\$400,000]	[2]%	[\$26,285]	[\$1,168,253]

The table above shows how the monthly and total benefit amounts will increase with no benefit increase option and the Urban CPI benefit increase option for the plan. The graph below plots these values.



[This page will only print if the FPO Benefit Increase Option has been selected.]

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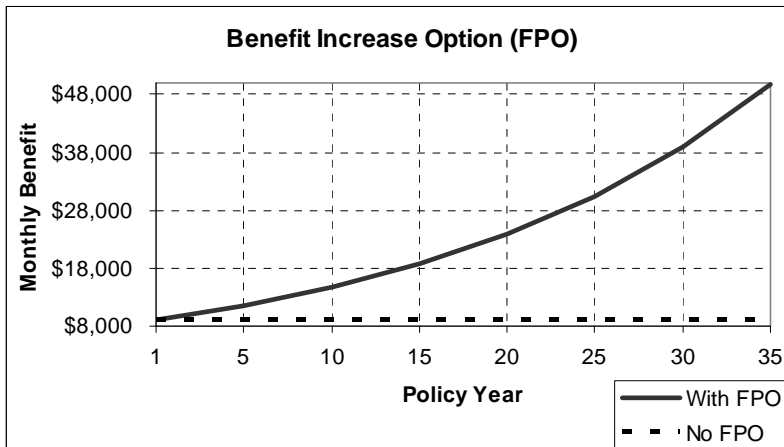
Future Purchase Option (FPO) Rider Comparison for [Plan2] This is the plan that the rider was selected for.

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To illustrate how the Future Purchase Option (FPO) Rider works, the table and graph below illustrate what the Monthly Benefit and Total Benefit Amount would be if No Benefit Increase Protection or the FPO Rider is selected. The example below illustrates a policy that does not use a Benefit Increase Option and a policy that has it's Monthly and Total Benefit Amounts increased by 5% each year under the FPO Rider.

Policy Year	No Benefit Increase Option		Future Purchase	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	[\$9,000]	[\$400,000]	[\$9,000]	[\$400,000]
[5]	[\$9,000]	[\$400,000]	[\$11,486]	[\$510,512]
[10]	[\$9,000]	[\$400,000]	[\$14,660]	[\$651,557]
[15]	[\$9,000]	[\$400,000]	[\$18,710]	[\$831,571]
[20]	[\$9,000]	[\$400,000]	[\$23,879]	[\$1,061,319]
[25]	[\$9,000]	[\$400,000]	[\$30,477]	[\$1,354,541]
[30]	[\$9,000]	[\$400,000]	[\$38,897]	[\$1,728,776]
[35]	[\$9,000]	[\$400,000]	[\$49,644]	[\$2,206,406]

The table above shows how the monthly and total benefit amounts will increase with no benefit increase option and the Future Purchase Option benefit increase option for the plan. The graph below plots these values.



]

[This page will print if the GPO has been selected]

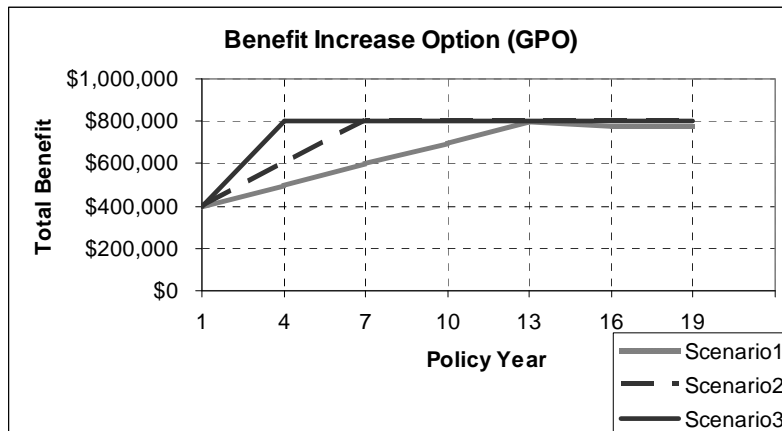
[Guaranteed Purchase Option (GPO) Rider Comparison for [Plan2]]

This is the plan that the GPO was selected for

To illustrate how the Guaranteed Purchase Option (GPO) Rider works, the table and graph below illustrate three possible scenarios for how you might choose to use the GPO*. Each scenario shows how the Monthly Benefits and Total Benefit Amounts would be affected. Scenario 1 assumes that a 25% increase is applied on the 3rd, 6th, 9th, and 12th policy anniversaries. Scenario 2 assumes that a 50% increase is applied on the 3rd and 6th policy anniversaries, while Scenario 3 assumes a one-time 100% increase on the 3rd policy anniversary.

Year	GPO Scenario 1		GPO Scenario 2		GPO Scenario 3	
	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount	Monthly Benefit	Total Benefit Amount
[1]	[\$6,000]	[\$400,000]	[\$6,000]	[\$400,000]	[\$6,000]	[\$400,000]
[4]	[\$7,500]	[\$500,000]	[\$9,000]	[\$600,000]	[\$12,000]	[\$800,000]
[7]	[\$9,000]	[\$600,000]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]
[10]	[\$10,500]	[\$700,000]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]
[13]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]
[16]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]
[19]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]	[\$12,000]	[\$800,000]

The table above shows how the GPO will increase the monthly and total benefit amounts under 3 different scenarios, the graph below plots these values.



*Under the GPO any increase must be at least 25% and the total of all increases may not exceed 100% of your initial total benefit amount.]

[Policy Feature, Optional Rider, and Discounts Explanations

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy. Please refer to your Outline of Coverage for complete details.

Built In Benefits

Every MetLife [LTC LifeStage Advantage] policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.

Return of Premium

If you die on or before your 70th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.

Waiver of Premium

If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums

International Benefit

If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.

Care Advisory Services

This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.

Bed Reservation

If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.

Needs Assessment

After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.

Hospice Facility/Hospice Care at Home

This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.

Elimination Period for Covered Services

This policy includes a [100]This is the number of days in the elimination period calendar day elimination period for covered services This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

[Benefit Increase Option] This line will only print if at least one of the plans being illustrated has a benefit increase option chosen for it.

[5% Automatic Compound Inflation Protection Rider] This will only print if the 5% ACI rider has been selected for at least one of the plans being illustrated.

[Automatically increases every year by 5%. There is no additional corresponding increase in premium due to the automatic benefit increases.] This will only print if the 5% ACI rider has been selected for at least one of the plans being illustrated.

[3% Automatic Compound Inflation Protection Rider] This will only print if the 3% ACI rider has been selected for at least one of the plans being illustrated.

[Automatically increases every year by 3%. There is no additional corresponding increase in premium due to the automatic benefit increases.] This will only print if the 3% ACI rider has been selected for at least one of the plans being illustrated.

[Future Purchase Option Rider] This will only print if the FPO rider has been selected for at least one of the plans being illustrated.

[Automatically increases by 5% every year unless rejected in writing. Option ceases if you reject twice in a row. New premium price based on age when increase takes effect.] This will only print if the FPO rider has been selected for at least one of the plans being illustrated.

[Urban CPI Compound Inflation Protection Rider] This will only print if the Urban CPI rider has been selected for at least one of the plans being illustrated.

[Automatically increases every year and is tied to the CPI. There is no additional corresponding increase in premium due to the automatic benefit increases.] This will only print if the Urban CPI rider has been selected for at least one of the plans being illustrated.

[Guaranteed Purchase Option Rider] This will only print if the GPO rider has been selected for at least one of the plans being illustrated.

[As often as every 3 years, purchase an increase in coverage without providing proof of good health. Total purchases may be up to 100% of your original total benefit amount.] This will only print if the GPO rider has been selected for at least one of the plans being illustrated.

[Optional Benefits] This line will only print if at least one of the plans being illustrated has at least 1 optional benefit being illustrated.

[Shared Care Rider] This will only print if the Shared Care Rider has been selected for at least one of the plans being illustrated.

[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.] This will only print if the Shared Care Rider has been selected for at least one of the plans being illustrated.

[Nonforfeiture Rider] This will only print if the Nonforfeiture Rider has been selected for at least one of the plans being illustrated.

[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.] This will only print if the Nonforfeiture Rider has been selected for at least one of the plans being illustrated.

[Cash Benefit Rider] This will only print if the Cash Benefit Rider has been selected for at least one of the plans being illustrated.

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[LTC2007 Product Name]

[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludible amount, proceeds from all sources of long term care reimbursement (e.g. other policies and Medicare) must be aggregated.] **This will only print if the Cash Benefit Rider has been selected for at least one of the plans being illustrated.**

[Ten Year Premium Payment Rider] **This will only print if the Ten Year Premium Payment Rider has been selected for at least one of the plans being illustrated.**

[With this rider, once you have paid premiums up to your 10th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to selecting an accelerated premium payment rider.] **This will only print if the Ten Year Premium Payment Rider has been selected for at least one of the plans being illustrated**

[Discounts] **This will only print if at least one of the plans being illustrated has at least one discount selected for it.**

[Spousal Discount Rider] **This will only print if the Spousal Discount has been selected for at least one of the plans being illustrated.**

[Premiums for your coverage will be subject to a [30]**This is the percentage of the spousal discount**% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.] **This will only print if the Spousal Discount has been selected for at least one of the plans being illustrated.**

[Marital Discount] **This will only print if the Marital Discount has been selected for at least one of the plans being illustrated.**

[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]**this is the percentage of the marital discount**% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.] **This will only print if the Marital Discount has been selected for at least one of the plans being illustrated.**

[Residential Discount] **This will only print if the Residential discount has been selected for at least one of the plans being illustrated.**

[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]**This is the percentage of the residential discount**% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)] **This will only print if the Residential discount has been selected for at least one of the plans being illustrated.**

[Preferred Discount] **This will only print if the Preferred discount has been selected for at least one of the plans being illustrated.**

[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]**This is the percentage for the Preferred discount**% discount on your premiums.] **This will only print if the Preferred discount has been selected for at least one of the plans being illustrated.**

[Multi-Life Discount] **This will only print if a multi-life discount is being applied to at least one of the plans being illustrated.**

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MetLife®
[LTC2007 Product Name]

[Employer Paid – [5] [This is the percentage for the multi-life discount](#) % - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.] [This will only print if a ER paid multi-life discount is being applied to at least one of the plans being illustrated.](#)

[Employer Paid – [10] [This is the percentage for the multi-life discount](#) % - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.] [This will only print if a ER paid multi-life discount is being applied to at least one of the plans being illustrated.](#)

[Voluntary Paid – [5] [This is the percentage for the multi-life discount](#)% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.] [This will only print if a Voluntary paid multi-life discount is being applied to at least one of the plans being illustrated.](#)

For a full description of each of the features listed, please refer to the Outline of Coverage provided to you by your agent.

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[This entire page will only print if one or more of the plans being illustrated is a partnership plan.]

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The [State] This is the state the partnership is being illustrated for Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] This is the state the partnership is being illustrated for qualify for the [State] This is the state the partnership is being illustrated for Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as "Asset Disregard," under [State's] This is the state the partnership is being illustrated for Medicaid program.

Asset Disregard means that an amount of the policyholder's assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured's eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person's eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife's individual long-term care insurance policies may now be offered to [State] This is the state the partnership is being illustrated for residents as [State] This is the state the partnership is being illustrated for Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:

[Insert State Specific Requirements] The state specific requirements for the state the partnership policy is being illustrated for go here

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What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] This is the state the partnership is being illustrated for and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] This is the state the partnership is being illustrated for Department of Health and Welfare.]

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:] **This will only print if the Cash Benefit Rider has been selected**

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- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;] **This will only print if the Cash Benefit Rider has been selected**
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;] **This will only print if the Cash Benefit Rider has been selected**
- [any injury or sickness that results from:] **This will only print if the Cash Benefit Rider has been selected**
 - any war, or act of war (whether declared or undeclared); **This will only print if the Cash Benefit Rider has been selected**
 - participation in a felony, riot or insurrection; or **This will only print if the Cash Benefit Rider has been selected**
 - any intentionally self-inflicted injury; **This will only print if the Cash Benefit Rider has been selected**
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;] **This will only print if the Cash Benefit Rider has been selected**
- [any care or services received outside of the United States, except as described in the International Benefit section;] **This will only print if the Cash Benefit Rider has been selected**
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law;] **This will only print if the Cash Benefit Rider has been selected**
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or] **This will only print if the Cash Benefit Rider has been selected**
- [services for which no charge is normally made in the absence of insurance.] **This will only print if the Cash Benefit Rider has been selected**

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

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- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or
- any motor vehicle no-fault law.

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[LTC2007 Product Name]

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has been selected.](#)

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[Coordination With Other MetLife Coverages]

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

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- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.]

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has been selected.](#)

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[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
- participation in a felony, riot or insurrection; or
- any intentionally self-inflicted injury;]

[This section will only print if the Cash Benefit Rider has been selected](#)

Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

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Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

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MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

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The information contained in this document is not intended to (and cannot) be used by anyone to avoid IRS penalties. This document supports the promotion and marketing of this long term care. You should seek advice based on your particular circumstances from an independent tax advisor.

MetLife, its agents, and representatives may not give legal or tax advice. Any discussion of taxes herein or related to this document is for general information purposes only and does not purport to be complete or cover every situation. Tax law is subject to interpretation and legislative change. Tax results and the appropriateness of any product for any specific taxpayer may vary depending on the facts and circumstances. You should consult with and rely on your own independent legal and tax advisers regarding your particular sets of facts and circumstances.

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Individual LTCL Proposal

[Product Name] The name of the product will print here

MetLife®



Prepared for: [Insured1 Name]
& [Insured2 Name]

Prepared by: [Sample Agent]

[200 Park Ave]
[New York]
[New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

The above table will show the client name(s), agent information and the date and time that the illustration was prepared.

MetLife®

[LTC2007 Product Name]

[Sample Insured]
[Sample Insured2]

Age: [45], [Standard]
[Age:][45][,][Standard]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during your lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If you needed assistance with some of the everyday activities of living such as dressing and bathing, it could have a significant impact on your family, your savings and your lifestyle. That’s why it’s important to have a plan for how you would pay for long-term care should the need arise.

How would you pay for long-term care?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor’s visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of your income if you become disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you’ve “**spent down**” virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- Your **retirement savings**, intended to support you and your family throughout your retirement years, may become the **only** available source of payment.

MetLife makes it easy to help protect what you value most.

Providing protection for you and your family from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer you a straight-forward, easily customized insurance policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care in your home.

You’re one step closer to designing a plan that fits your life.

By inquiring about long-term care insurance, you’ve taken an important first step toward creating a plan that protects your family, your finances and your choices for the future. Now, you can select the plan that best fits your needs and your budget. Depending on your situation, you may want to take advantage of the ability to customize your coverage with optional inflation protection. Be sure to ask about the Benefit Increase Options and the other optional features that are available to you.

Relax. With MetLife, you have a plan that fits your life today... so you don’t have to worry about tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Your [Plan Name] <small>This is the name of the plan being illustrated</small> illustration at a glance	
Policy Benefits	Initial Annual Premium
Total Benefit Amount	\$[400,000] <small>This is the total benefit amount selected</small> \$[750.00] <small>This is the premium for the total and monthly benefit</small>
Monthly Benefit Amount	\$[6,000] <small>This is the monthly benefit amount selected</small>
[Partnership*] <small>This will only print if the plan is a partnership plan</small>	[yes] <small>This will only print if the plan is a partnership plan</small>

Every MetLife [LTC LifeStage Advantage] This is the name of the product being illustrated policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium Bed Reservation
 Policy Waiver of Premium Needs Assessment
 International Coverage Care Advisory Services
 Hospice Facility/Hospice Care at Home

Elimination Period [100] This is the number of days in the elimination period Calendar Days

[Benefit Increase Option] This will only print if a Benefit Increase Option has been selected

[5% Automatic Compound Inflation Rider] This will only print if 5% ACI is selected as the Benefit Increase Option \$[975.00] This is the premium for the 5% ACI Benefit Increase Option and will only print if the rider has been selected

[3% Automatic Compound Inflation Rider] This will only print if 3% ACI is selected as the Benefit Increase Option \$[975.00] This is the premium for the 3% ACI Benefit Increase Option and will only print if the rider has been selected

[Future Purchase Option Rider] This will only print if FPO is selected as the Benefit Increase Option \$[975.00] This is the premium for the FPO Benefit Increase Option and will only print if the rider has

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

been selected
 \$[975.00] This is the
 premium for the
 Urban CPI Benefit
 Increase Option and
 will only print if the
 rider has been
 selected

[Urban CPI Compound Inflation Protection Rider] This will only print if FPO is selected as the
 Benefit Increase Option

[Optional Benefits] This will only print if at least one optional benefit has been selected

[Shared Care Rider] This will only print if the Shared Care Rider has been selected \$[100.00] This is the
 premium for the
 Shared Care Rider.
 [Nonforfeiture Coverage Rider] This will only print if the Nonforfeiture Rider has been selected. \$[100.00] This is the
 premium for the
 nonforfeiture rider
 [Cash Benefit Rider^[1]] This will only print if the Cash Benefit Rider has been selected \$[100.00] This is the
 premium for the
 Cash Benefit Rider
 [Ten Year Premium Payment Rider^[2]] This will only print if the Ten Year Premium Payment \$[1,487.50] This is
 Rider has been selected The superscript number at the end of this line depends on the premium for the
 whether the Cash Benefit Rider has been selected, if it has then this number will be a "2",
 if not then this number will be a "1". Ten Year Premium
 Payment Rider

[Discounts] This will only print if at least one discount is being applied to the premium

[Spousal Discount Rider] This will only print if the Spousal discount is being applied to the \$-[637.50] This is the
 premium. Spousal Discount
 amount
 [Marital Discount] This will only print if the Marital Discount is being applied to the premium \$-[637.50] This is the
 Marital Discount
 amount
 [Residential Discount] This will only print if the Residential Discount is being applied to the \$-[637.50] This is the
 Residential Discount
 amount
 [Preferred Discount] This will only print if the Preferred Discount is being applied to the premium \$-[637.50] This is the
 Preferred Discount
 amount
 [Multi-Life Discount] This will only print if the Multi-Life Discount is being applied to the premium \$-[100.00] This is the
 Multi-Life Discount
 amount

Total Initial Annual Premium[(with Discounts)]^[3] "(with Discounts)" will only print
 if at least one discount is being applied to the premium. The superscript
 number that is at the end of this line is dependant on whether the Cash
 Benefit Rider and the Ten Year Premium rider have been selected. If both
 were selected then this number should be "3", if only one of the two have

\$[1,487.50] This is
 the Total Initial
 Annual Premium with
 any discounts
 applied to it.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

been selected this number should be a "2", and if neither have been selected then this number should be a "1"

[Monthly]This is the payment mode selected Modal Premium Amount \$[1,560.00]This is the modal premium amount

[Total Annual Premium On and After 10th Policy Anniversary^[2]]This will only print if the Ten Year Premium Payment Rider has been selected, the number that follows this line will be the same number that prints after the Ten Year Premium Payment Rider line above. \$[0.00]This will only print if the Ten Year Premium Payment Rider has been selected, this value will always be \$0.00

Split Billing Method:

[Core Method]This will only print if a Core Method Split Billing plan is being illustrated [Core benefits listed are employer paid.]This will only print if a Core Method Split Billing plan has been selected

[Employer Contribution,]This will only print if either Dollar Amount Method or Percent Method has been selected as the Split Billing method.

[Dollar Amount Method]This will only print if the Dollar Amount Method has been selected as the Split Billing Method \$[1,111.11]This is the Employers Dollar Amount Contribution[Monthly]This is the Employers payment mode

[Percent Method]This will only print if the Percent Method has been selected as the Split Billing method [50.00%]This is the percent of the premium that the employer is willing to pay.

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [6]].Bracketed text will only print if the Policy Feature, Optional Rider, and Discount Explanations section is being included with the illustration, the page number that prints will be the page that this section of the output begins.

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.]This will only print if this is a Partnership Plan

[¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.]This will only print if the Cash Benefit Rider has been selected.

[²] If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.] This will only print if the Ten Year Premium Payment Rider has been selected. The superscript number that begins this line is dependant on whether the Cash Benefit Rider has been selected, if it has then this number will be "2", if it has not then this number will be "1".

[³] Please note that there is an additional cost if you pay premium more frequently than annually. The superscript number that begins this line is dependant on the selection of the Cash Benefit Rider and the Ten Year Premium Payment Rider. If both have

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

been selected this number will be “3”, if only one has been selected then this number will be “2”, and if neither have been selected then this number will be “1”.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly]This is the payment mode selected for the Employer Premiums	Insured's Initial [Monthly]This is the payment mode selected for the Employee Premiums
Base Coverage	See above	\$[XXX.XX]This is the amount the Employer will pay for the Base Coverage	\$[XXX.XX]This is the amount the Employee will pay for the Base Coverage
Benefit Increase Option	[Guaranteed Purchase Option Rider]This is the Benefit Increase Option selected in the GUI	\$[XX.XX]This is the amount the Employer will pay for the Benefit Increase Option	\$[XX.XX]This is the amount the Employee will pay for the Benefit Increase Option
[Shared Care Rider]This row will only print if the Shared Care Rider has been selected	[Yes]This will only print if the Shared Care Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Shared Care Rider	\$[XX.XX]This is the amount the Employee will pay for the Shared Care Rider
[Nonforfeiture Coverage Rider]This row will print if the Nonforfeiture Coverage Rider has been selected	[Yes]This will only print if the Nonforfeiture Coverage Rider has been selected	\$[XX.XX]This is the amount that the Employer will pay for the Nonforfeiture Coverage Rider	\$[XX.XX]This is the amount that the Employee will pay for the Nonforfeiture Coverage Rider
[Cash Benefit Rider ^[1]]This row will only print if the Cash Benefit Rider has been selected.	[Yes]This will only print if the Cash Benefit Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Cash Benefit Rider	\$[XX.XX]This is the amount the Employee will pay for the Cash Benefit Rider
Total Modal Premium[(with Discounts)]"(with discounts)" will only print if there is at least one discount being applied to the policy		\$[XXX.XX]*This is the Employers Total Modal Premium amount	\$[XXX.XX]*This is the Employees Total Modal Premium amount

Employer Paid Portion is capped at \$[XXX.XX]This is the maximum the Employer will pay per year for the plan.
Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the premium for the policy.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

[This entire page will only print if there is a Spouse/Resident on the policy]

Your [Plan Name] <small>This is the name of the plan being illustrated</small> illustration at a glance	
Policy Benefits	Initial Annual Premium
Total Benefit Amount	\$[400,000] <small>This is the total benefit amount selected</small> \$[750.00] <small>This is the premium for the total and monthly benefit</small>
Monthly Benefit Amount	\$[6,000] <small>This is the monthly benefit amount selected</small>
[Partnership*] <small>This will only print if the plan is a partnership plan</small>	[yes] <small>This will only print if the plan is a partnership plan</small>

Every MetLife [LTC LifeStage Advantage] This is the name of the product being illustrated policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium	Bed Reservation
Policy Waiver of Premium	Needs Assessment
International Coverage	Care Advisory Services
Hospice Facility/Hospice Care at Home	

Elimination Period	[100] <small>This is the number of days in the elimination period</small> Calendar Days
--------------------	--

[Benefit Increase Option] This will only print if a Benefit Increase Option has been selected

[Shared Care Rider] <small>This will only print if the Shared Care Rider has been selected</small>	\$[100.00] <small>This is the premium for the Shared Care Rider.</small>
[Nonforfeiture Coverage Rider] <small>This will only print if the Nonforfeiture Rider has been selected.</small>	\$[100.00] <small>This is the premium for the nonforfeiture rider</small>
[Cash Benefit Rider] ^[1] <small>This will only print if the Cash Benefit Rider has been selected</small>	\$[100.00] <small>This is the premium for the Cash Benefit Rider</small>
[Ten Year Premium Payment Rider] ^[2] <small>This will only print if the Ten Year Premium Payment Rider has been selected The superscript number at the end of this line depends on whether the Cash Benefit Rider has been selected, if it has then this number will be a "2", if not then this number will be a "1".</small>	\$[1,487.50] <small>This is the premium for the Ten Year Premium Payment Rider</small>

[Optional Benefits] This will only print if at least one optional benefit has been

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

selected

[Shared Care Rider]	This will only print if the Shared Care Rider has been selected	\$[100.00]	This is the premium for the Shared Care Rider.
[Nonforfeiture Coverage Rider]	This will only print if the Nonforfeiture Rider has been selected.	\$[100.00]	This is the premium for the nonforfeiture rider
[Cash Benefit Rider] ^[1]	This will only print if the Cash Benefit Rider has been selected	\$[100.00]	This is the premium for the Cash Benefit Rider
[Ten Year Premium Payment Rider] ^[2]	This will only print if the Ten Year Premium Payment Rider has been selected The superscript number at the end of this line depends on whether the Cash Benefit Rider has been selected, if it has then this number will be a "2", if not then this number will be a "1".	\$[1,487.50]	This is the premium for the Ten Year Premium Payment Rider

[Discounts] This will only print if at least one discount is being applied to the premium

[Spousal Discount Rider]	This will only print if the Spousal discount is being applied to the premium.	-\$[637.50]	This is the Spousal Discount amount
[Marital Discount]	This will only print if the Marital Discount is being applied to the premium	-\$[637.50]	This is the Marital Discount amount
[Residential Discount]	This will only print if the Residential Discount is being applied to the premium	-\$[637.50]	This is the Residential Discount amount
[Preferred Discount]	This will only print if the Preferred Discount is being applied to the premium	-\$[637.50]	This is the Preferred Discount amount
[Multi-Life Discount]	This will only print if the Multi-Life Discount is being applied to the premium	-\$[100.00]	This is the Multi-Life Discount amount

Total Initial Annual Premium[(with Discounts)]^[3] (with Discounts)" will only print if at least one discount is being applied to the premium. The superscript number that is at the end of this line is dependant on whether the Cash Benefit Rider and the Ten Year Premium rider have been selected. If both were selected then this number should be "3", if only one of the two have been selected this number should be a "2", and if neither have been selected then this number should be a "1"

\$[1,487.50] This is the Total Initial Annual Premium with any discounts applied to it.

[Monthly] This is the payment mode selected Modal Premium Amount \$[1,560.00] This is the modal premium amount

[Total Annual Premium On and After 10th Policy Anniversary]^[2] This will only print if the Ten Year Premium Payment Rider has been selected, the number that follows this line will be the same number that prints after the Ten Year \$[0.00] This will only print if the Ten Year Premium Payment

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

Premium Payment Rider line above.

Rider has been selected, this value will always be \$0.00

Split Billing Method:

[Core Method] This will only print if a Core Method Split Billing plan is being illustrated

[Core benefits listed are employer paid.] This will only print if a Core Method Split Billing plan has been selected

[Employer Contribution,] This will only print if either Dollar Amount Method or Percent Method has been selected as the Split Billing method.

[Dollar Amount Method] This will only print if the Dollar Amount Method has been selected as the Split Billing Method

[\$1,111.11] This is the Employers Dollar Amount Contribution [Monthly] This is the Employers payment mode

[Percent Method] This will only print if the Percent Method has been selected as the Split Billing method

[50.00%] This is the percent of the premium that the employer is willing to pay.

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal and the descriptions on page [6]. Bracketed text will only print if the Policy Feature, Optional Rider, and Discount Explanations section is being included with the illustration, the page number that prints will be the page that this section of the output begins.

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.] This will only print if this is a Partnership Plan

[¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.] This will only print if the Cash Benefit Rider has been selected.

[²] If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.] This will only print if the Ten Year Premium Payment Rider has been selected. The superscript number that begins this line is dependant on whether the Cash Benefit Rider has been selected, if it has then this number will be "2", if it has not then this number will be "1".

[³] Please note that there is an additional cost if you pay premium more frequently than annually. The superscript number that begins this line is dependant on the selection of the Cash Benefit Rider and the Ten Year Premium Payment Rider. If both have been selected this number will be "3", if only one has been selected then this number will be "2", and if neither have been selected then this number will be "1".

]

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

This entire page will only print if there is a Spouse/Resident on the policy.

[Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly]This is the payment mode selected for the Employer Premiums	Insured's Initial [Monthly]This is the payment mode selected for the Employee Premiums
Base Coverage	See above	\$[XXX.XX]This is the amount the Employer will pay for the Base Coverage	\$[XXX.XX]This is the amount the Employee will pay for the Base Coverage
Benefit Increase Option	[Guaranteed Purchase Option Rider]This is the Benefit Increase Option selected in the GUI	\$[XX.XX]This is the amount the Employer will pay for the Benefit Increase Option	\$[XX.XX]This is the amount the Employee will pay for the Benefit Increase Option
[Shared Care Rider]This row will only print if the Shared Care Rider has been selected	[Yes]This will only print if the Shared Care Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Shared Care Rider	\$[XX.XX]This is the amount the Employee will pay for the Shared Care Rider
[Nonforfeiture Coverage Rider]This row will print if the Nonforfeiture Coverage Rider has been selected	[Yes]This will only print if the Nonforfeiture Coverage Rider has been selected	\$[XX.XX]This is the amount that the Employer will pay for the Nonforfeiture Coverage Rider	\$[XX.XX]This is the amount that the Employee will pay for the Nonforfeiture Coverage Rider
[Cash Benefit Rider ^[1]]This row will only print if the Cash Benefit Rider has been selected.	[Yes]This will only print if the Cash Benefit Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Cash Benefit Rider	\$[XX.XX]This is the amount the Employee will pay for the Cash Benefit Rider
Total Modal Premium[(with Discounts)]"(with discounts)" will only print if there is at least one discount being applied to the policy		\$[XXX.XX]*This is the Employers Total Modal Premium amount	\$[XXX.XX]*This is the Employees Total Modal Premium amount

Employer Paid Portion is capped at \$[XXX.XX]This is the maximum the Employer will pay per year for the plan.
Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the
premium for the policy.

]

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Proposed Total Initial Premium

	Annual	Semi-Annual	Quarterly	Monthly
[Insured1] The client's name will print here	\$[1,387.50]This is the total Annual premium for the client	\$[705.00]This is the total semi-annual premium for the Client	\$[355.00]This is the total Quarterly premium for the Client	\$[125.00]This is the total Monthly premium for the Client
[Insured2] The Spouse/Resident's name will print here if one has been entered in the GUI	\$[1,387.50]This is the total Annual premium for the Spouse/Resident	\$[705.00]This is the total semi-annual premium for the Spouse/Resident	\$[355.00]This is the total Quarterly premium for the Spouse/Resident	\$[125.00]This is the total Monthly premium for the Spouse/Resident
[Both Insureds] This entire line will only print if there is a Spouse/Resident on the policy	\$[2,775.00]This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[1,410.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[710.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[250.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy
Annualized Total Initial Premium	\$[2,775.00]This is the total annualized premium for the Annual payment mode for everyone on the illustration	\$[2,820.00]This is the total annualized premium for the Semi-Annual payment mode for everyone on the illustration	\$[2,840.00]This is the total annualized premium for the Quarterly payment mode for everyone on the illustration	\$[3,000.00]This is the total annualized premium for the Monthly payment mode for everyone on the illustration.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

This page will only print if the 3% or 5% ACI Benefit Increase Option has been selected in the GUI. If selected for both the Client and the Spouse/Resident then it will print twice.

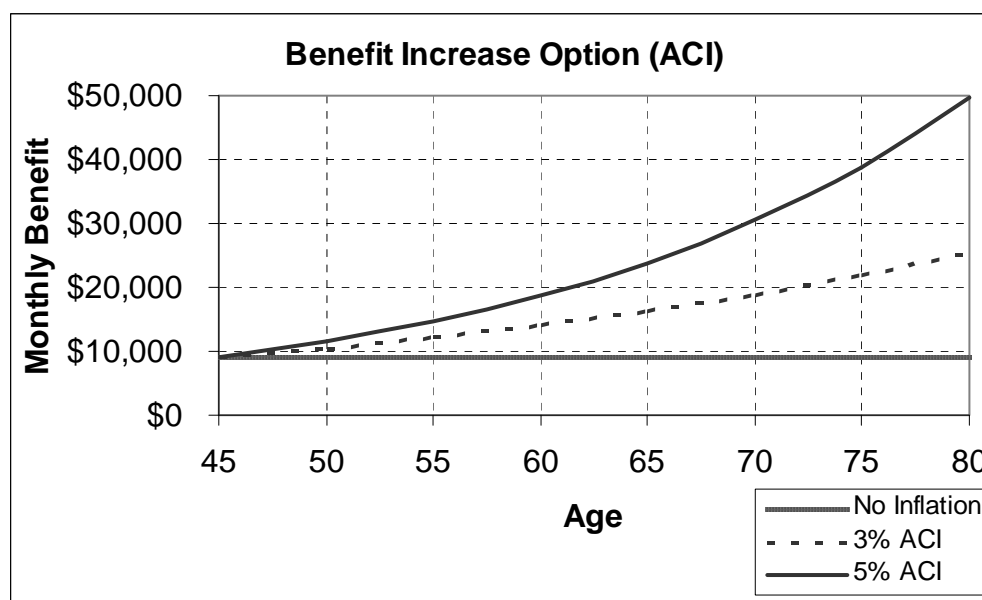
[

Automatic Compound Inflation (ACI) Rider Comparison

To help you understand how the different Benefit Increase Options work, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount, and Premium* would be if you chose No Benefit Increase Option, the 3% Automatic Compound Inflation (ACI) Rider, or the 5% Automatic Compound Inflation (ACI) Rider.

	<u>No Benefit Increase Option</u>			<u>3% ACI</u>			<u>5% ACI</u>		
Age	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[1,800]	\$[9,000]	\$[400,000]	\$[2,000]	\$[9,000]	\$[400,000]	\$[2,200]
[50]	\$[9,000]	\$[400,000]	\$[1,800]	\$[10,433]	\$[463,709]	\$[2,000]	\$[11,486]	\$[510,512]	\$[2,200]
[55]	\$[9,000]	\$[400,000]	\$[1,800]	\$[12,095]	\$[537,566]	\$[2,000]	\$[14,660]	\$[651,557]	\$[2,200]
[60]	\$[9,000]	\$[400,000]	\$[1,800]	\$[14,021]	\$[623,186]	\$[2,000]	\$[18,710]	\$[831,571]	\$[2,200]
[65]	\$[9,000]	\$[400,000]	\$[1,800]	\$[16,255]	\$[722,444]	\$[2,000]	\$[23,879]	\$[1,061,319]	\$[2,200]
[70]	\$[9,000]	\$[400,000]	\$[1,800]	\$[18,844]	\$[837,511]	\$[2,000]	\$[30,477]	\$[1,354,541]	\$[2,200]
[75]	\$[9,000]	\$[400,000]	\$[1,800]	\$[21,845]	\$[970,904]	\$[2,000]	\$[38,897]	\$[1,728,776]	\$[2,200]
[80]	\$[9,000]	\$[400,000]	\$[1,800]	\$[25,324]	\$[1,125,544]	\$[2,000]	\$[49,644]	\$[2,206,406]	\$[2,200]

The table above shows what the Monthly Benefit and Total Benefit Amount could be inflated to with the 3% ACI Rider and the 5% ACI Rider. Premiums are shown for all years shown. The graph below plots the Monthly Benefit Amount in each example.



MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

*Illustration of Future Premium assumes no increase in rates]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

This page will only print if the Urban CPI Benefit Increase Option has been selected for the Client or the Spouse/Resident. If the rider is selected for both the Client and the Spouse/Resident then this page will print twice.

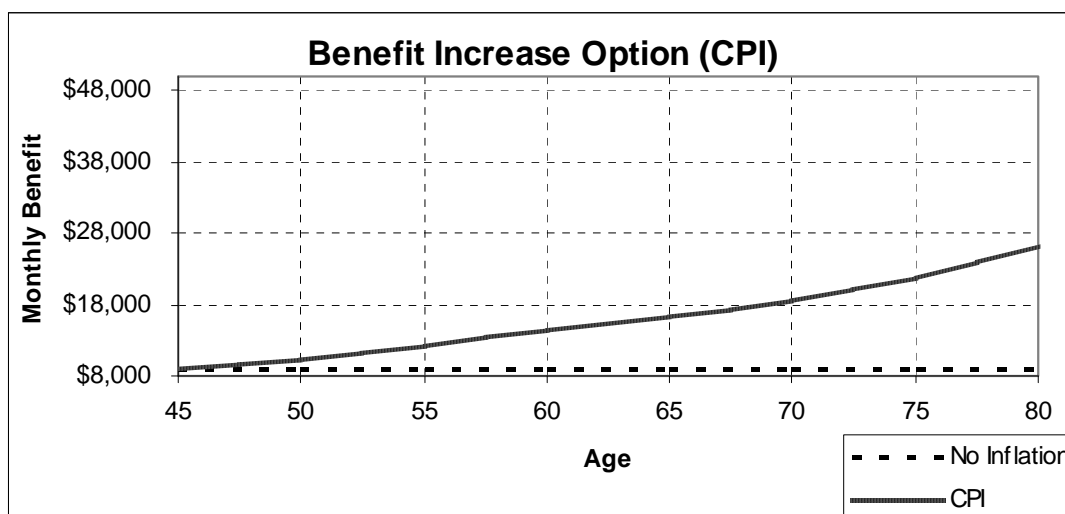
[

Urban Consumer Price Index (CPI) Rider Inflation Comparison

To help you understand how the Consumer Price Index (CPI) Rider option works, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount, and Premium* would be with Urban CPI inflation using hypothetical Urban CPI percentages.

Age	No Benefit Increase Option			Urban CPI			
	Monthly Benefit	Total Benefit Amount	Premium	CPI %	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[9,000]	\$[400,000]	\$[2,200]
[50]	\$[9,000]	\$[400,000]	\$[2,000]	[2]%	\$[10,132]	\$[450,334]	\$[2,200]
[55]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[12,206]	\$[542,531]	\$[2,200]
[60]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[14,424]	\$[641,095]	\$[2,200]
[65]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[16,398]	\$[728,843]	\$[2,200]
[70]	\$[9,000]	\$[400,000]	\$[2,000]	[3]%	\$[18,643]	\$[828,603]	\$[2,200]
[75]	\$[9,000]	\$[400,000]	\$[2,000]	[4]%	\$[21,610]	\$[960,487]	\$[2,200]
[80]	\$[9,000]	\$[400,000]	\$[2,000]	[2]%	\$[26,285]	\$[1,168,253]	\$[2,200]

The table above shows what the Monthly Benefit Amount, Total Benefit Amount, and Premium could be in future years with no Benefit Increase Option and with Urban CPI as the Benefit Increase Option. The graph below plots the Monthly Benefit Amount from each example.



*Illustration of Future Premium assumes no increase in rates

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MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

This page will only print if the FPO has been selected for the Client or the Spouse/Resident. If the rider has been selected for both then this page will be printed twice.

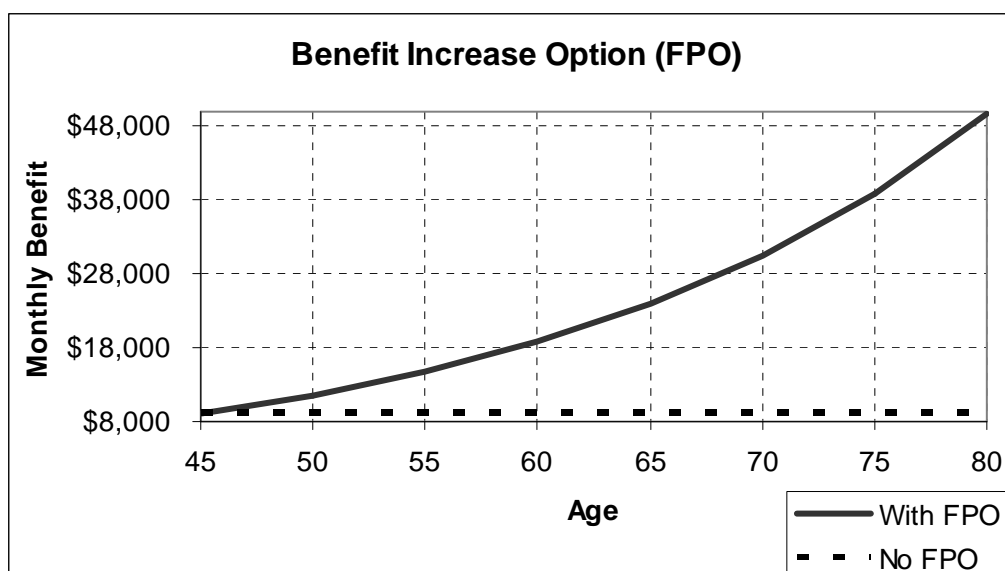
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Future Purchase Option (FPO) Rider Comparison

To help you understand how the Future Purchase Option (FPO) Rider works, the table and graph below illustrate what your Monthly Benefit, Total Benefit Amount and Premium* would be if you chose No Benefit Increase Option or the Future Purchase Option. The example below assumes all increases are accepted.

Age	No Benefit Increase Option			Future Purchase		
	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[9,000]	\$[400,000]	\$[1,800]	\$[9,000]	\$[400,000]	\$[1,800]
[50]	\$[9,000]	\$[400,000]	\$[1,800]	\$[11,486]	\$[510,512]	\$[2,297]
[55]	\$[9,000]	\$[400,000]	\$[1,800]	\$[14,660]	\$[651,557]	\$[2,932]
[60]	\$[9,000]	\$[400,000]	\$[1,800]	\$[18,710]	\$[831,571]	\$[3,742]
[65]	\$[9,000]	\$[400,000]	\$[1,800]	\$[23,879]	\$[1,061,319]	\$[4,775]
[70]	\$[9,000]	\$[400,000]	\$[1,800]	\$[30,477]	\$[1,354,541]	\$[6,095]
[75]	\$[9,000]	\$[400,000]	\$[1,800]	\$[38,897]	\$[1,728,776]	\$[7,779]
[80]	\$[9,000]	\$[400,000]	\$[1,800]	\$[49,644]	\$[2,206,406]	\$[9,928]

The table above shows what the Monthly Benefit Amount, Total Benefit Amount, and Premium could be in future years if No Benefit Increase Option is selected and if FPO is selected as the Benefit Increase Option. The graph below plots the Monthly Benefit Amount from each year in each example.



*Illustration of Future Premium assumes no increase in rates

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MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

This page will only print if the user has not selected to exclude the Policy Feature, Optional Rider, and Discounts Explanations section

[Policy Feature, Optional Rider, and Discounts Explanations]

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy. Please refer to your Outline of Coverage for complete details.

Built In Benefits
Every MetLife [LTC LifeStage Advantage] This is the name of the policy being illustrated. policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.
Return of Premium
If you die on or before your 70 th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.
Waiver of Premium
If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums ..
International Benefit
If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.
Care Advisory Services
This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.
Bed Reservation
If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.
Needs Assessment
After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.
Hospice Facility/Hospice Care at Home
This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.
Elimination Period for Covered Services
This policy includes a [100] calendar day elimination period for covered services This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

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[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Benefit Increase Option]	This line will only print if a Benefit Increase Option has been selected for at least one person on this illustration
[5% Automatic Compound Inflation Protection Rider]	This will only print if 5% ACI has been selected as the Benefit Increase Option for at least one person on this illustration
	[Automatically increases every year by 5%. There is no additional corresponding increase in premium due to the automatic benefit increases..] This will only print if 5% ACI has been selected as the Benefit Increase Option for at least one person on this illustration
[3% Automatic Compound Inflation Protection Rider]	This will only print if 3% ACI has been selected as the Benefit Increase Option for at least one person on this illustration
	[Automatically increases every year by 3%. There is no additional corresponding increase in premium due to the automatic benefit increases.] This will only print if 3% ACI has been selected as the Benefit Increase Option for at least one person on this illustration
[Future Purchase Option Rider]	This will only print if FPO has been selected as the Benefit Increase Option for at least one person on this illustration
	[Automatically increases by 5% every year unless rejected in writing. Option ceases if you reject twice in a row. New premium price based on age when increase takes effect.] This will only print if FPO has been selected as the Benefit Increase Option for at least one person on this illustration
[Urban CPI Compound Inflation Protection Rider]	This will only print if Urban CPI has been selected as the Benefit Increase Option for at least one person on this illustration
	[Automatically increases every year and is tied to the CPI. There is no additional corresponding increase in premium due to the automatic benefit increases.] This will only print if Urban CPI has been selected as the Benefit Increase Option for at least one person on this illustration
[Optional Benefits]	This line will only print if at least one Optional Benefit has been selected for at least one person on this illustration.
[Shared Care Rider]	This will only print if the Shared Care Rider has been selected for at least one person on this illustration.
	[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.] This will only print if the Shared Care Rider has been selected for at least one person on this illustration.
[Nonforfeiture Rider]	This will only print if the Nonforfeiture Rider has been selected for at least one person on this illustration
	[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.] This will only print if the Nonforfeiture Rider has been selected for at least one person on this illustration
[Cash Benefit Rider]	This will only print if the Cash Benefit Rider has been selected for at least one person on this illustration
	[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludible amount, proceeds from all sources of

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

long term care reimbursement (e.g. other policies and Medicare) must be aggregated.] This will only print if the Cash Benefit Rider has been selected for at least one person on this illustration

[Ten Year Premium Payment Rider]This will only print if the Ten Year Premium Payment Rider has been selected for at least one person on this illustration.

[With this rider, once you have paid premiums up to your 10th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to selecting an accelerated premium payment rider.] This will only print if the Ten Year Premium Payment Rider has been selected for at least one person on this illustration.

[Discounts]This line will only print if at least one discount has been selected for at least one person on this illustration

[Spousal Discount Rider]This will only print if the Spousal Discount Rider has been selected for at least one person on this illustration

[Premiums for your coverage will be subject to a [30]This is the discount percentage for the Spousal Discount Rider% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.] This will only print if the Spousal Discount Rider has been selected for at least one person on this illustration

[Marital Discount]This will only print if the Marital Discount has been selected for at least one person on this illustration

[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]This is the percentage for the marital discount% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.] This will only print if the Marital Discount has been selected for at least one person on this illustration

[Residential Discount]This will only print if the Residential Discount has been selected for at least one person on this illustration

[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]This is the percentage for the Residential Discount% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)] This will only print if the Residential Discount has been selected for at least one person on this illustration

[Preferred Discount]This will only print if the Preferred Discount has been selected for at least one person on this illustration

[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]This is the percentage for the Preferred Discount% discount on your premiums.] This will only print if the Preferred Discount has been selected for at least one person on this illustration

[Multi-Life Discount]This will only print if the Multi-Life discount has been selected for at least one person on this illustration

[Employer Paid – [5]This is the percentage for the discount% - This discount is available to employees of an

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[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

<p>employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the 5% Employer Paid Discount has been selected for at least one person on this illustration</p>
<p>[Employer Paid – [10]This is the percentage for the discount% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the Employer Paid 10% discount has been selected for at least one person on this illustration</p>
<p>[Voluntary Paid – [5]This is the percentage for the discount% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the Voluntary Paid 5% discount has been selected for at least one person on the illustration</p>

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

This will only print if illustrating a Partnership policy

[The [State] This is the state selected for the partnership Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] This is the state selected for the partnership qualify for the [State] This is the state selected for the partnership Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as "Asset Disregard," under [State's] This is the state selected for the partnership Medicaid program.

Asset Disregard means that an amount of the policyholder's assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured's eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person's eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife's individual long-term care insurance policies may now be offered to [State] This is the state selected for the partnership residents as [State] This is the state selected for the partnership Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:

[Insert State Specific Requirements] State specific requirements for the partnership program will print here

What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change.. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] This is the state selected for the partnership and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] This is the state selected for the partnership Department of Health and Welfare.]

]

MetLife®
[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]	
[Sample Insured2]	[Age:][45][,][Standard]	
		Total Initial Annual Premium: \$[1,487.50]

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:] **This will only print if the Cash Benefit Rider has not been selected**

- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;] **This will only print if the Cash Benefit Rider has not been selected**
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;] **This will only print if the Cash Benefit Rider has not been selected**
- [any injury or sickness that results from:
 - any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;] **This will only print if the Cash Benefit Rider has not been selected**
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services; and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;] **This will only print if the Cash Benefit Rider has not been selected**
- [any care or services received outside of the United States, except as described in the International Coverage section;] **This will only print if the Cash Benefit Rider has not been selected**
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law or to Benefits paid under the International Benefit section;] **This will only print if the Cash Benefit Rider has not been selected**
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or] **This will only print if the Cash Benefit Rider has not been selected**
- [services for which no charge is normally made in the absence of insurance.] **This will only print if the Cash Benefit Rider has not been selected**

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

- any motor vehicle no-fault law.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has not been selected](#)

[Coordination With Other MetLife Coverages]

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has not been selected](#)

[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;]
- [This will only print if the Cash Benefit Rider has been selected](#)

Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

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MetLife, its agents, and representatives may not give legal or tax advice. Any discussion of taxes herein or related to this document is for general information purposes only and does not purport to be complete or cover every situation. Tax law is subject

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
Total Initial Annual Premium: \$[1,487.50]		

to interpretation and legislative change. Tax results and the appropriateness of any product for any specific taxpayer may vary depending on the facts and circumstances. You should consult with and rely on your own independent legal and tax advisers regarding your particular sets of facts and circumstances.

Individual LTCL Proposal

[Product Name] The name of the product will print here

MetLife®



Prepared for: [Insured1 Name]
& [Insured2 Name]

Prepared by: [Sample Agent]

[200 Park Ave]
[New York]
[New York 10166]

Prepared: [00:00:00 PM 0/0/0000]

The above table will show the client name(s), agent information and the date and time that the illustration was prepared.

MetLife®

[LTC2007 Product Name]

[Sample Insured]
[Sample Insured2]

Age: [45], [Standard]
[Age:][45][,][Standard]

You can help protect your family, your finances and your choices for the future.

The possibility of needing long-term care at some point during your lifetime is one of the big “ifs” in life. Many people of all ages need long-term care due to a chronic illness, injury, disability or cognitive impairment. In fact, nearly 40% of people needing long-term care are adults 18 to 64 years old.¹

If you needed assistance with some of the everyday activities of living such as dressing and bathing, it could have a significant impact on your family, your savings and your lifestyle. That’s why it’s important to have a plan for how you would pay for long-term care should the need arise.

How would you pay for long term care ?

- **Health insurance** and **Medicare** are designed to cover the cost of medical care, such as doctor’s visits and hospital stays and generally **do not** pay for long-term care.
- **Disability insurance** is designed to replace a portion of your income if you become disabled and unable to work and **does not** pay for long-term care.
- **Medicaid** will pay for **some** long-term care services, but only after you’ve “**spent down**” virtually all of the assets counted by the state in determining your eligibility, including your personal savings and retirement accounts.
- Your **retirement savings**, intended to support you and your family throughout your retirement years, may become the **only** available source of payment.

MetLife makes it easy to help protect what you value most.

Providing protection for you and your family from the high cost of long-term care is easier than you may have thought. MetLife is proud to offer you a straight-forward policy that provides the level of comprehensive coverage you want for a variety of long-term care services, including care in your home.

You’re one step closer to designing a plan that fits your life.

By inquiring about long-term care insurance, you’ve taken an important first step toward creating a plan that protects your family, your finances and your choices for the future. Now, you can select a plan that best fits your needs and your budget. Depending on your situation, you may want to take advantage of the flexibility to buy some coverage now and then add to it over time. Be sure to ask about the Guaranteed Purchase Option and the other optional features that are available to you.

Relax. With MetLife, you have a plan that fits your life today... so you don’t have to worry about tomorrow.

¹ Caregiving in the U.S., National Alliance for Caregiving and AARP, April 2004.

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[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

Your [Plan Name] <small>This is the name of the plan being illustrated</small> illustration at a glance	
Policy Benefits	Initial Annual Premium
Total Benefit Amount	\$[400,000] <small>This is the total benefit amount selected</small> <small>\$[750.00] This is the premium for the total and monthly benefit</small>
Monthly Benefit Amount	\$[6,000] <small>This is the monthly benefit amount selected</small>
[Partnership*] <small>This will only print if the plan is a partnership plan</small>	[yes] <small>This will only print if the plan is a partnership plan</small>

Every MetLife [LTC LifeStage Advantage] This is the name of the product being illustrated policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium Bed Reservation
 Policy Waiver of Premium Needs Assessment
 International Coverage Care Advisory Services
 Hospice Facility/Hospice Care at Home

Elimination Period [100] This is the number of days in the elimination period Calendar Days

[Benefit Increase Option] This will only print if a Benefit Increase Option has been selected

[Guaranteed Purchase Option Rider] This will only print if the GPO has been selected \$[975.00] This is the premium for the GPO

[Optional Benefits] This will only print if at least one optional benefit has been selected

[Shared Care Rider] This will only print if the Shared Care Rider has been selected \$[100.00] This is the premium for the Shared Care Rider.
 [Nonforfeiture Coverage Rider] This will only print if the Nonforfeiture Rider has been selected. \$[100.00] This is the premium for the nonforfeiture rider
 [Cash Benefit Rider^[1]] This will only print if the Cash Benefit Rider has been selected \$[100.00] This is the premium for the Cash Benefit Rider
 [Ten Year Premium Payment Rider^[2]] This will only print if the Ten Year Premium Payment \$[1,487.50] This is

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Rider has been selected The superscript number at the end of this line depends on whether the Cash Benefit Rider has been selected, if it has then this number will be a “2”, if not then this number will be a “1”.

the premium for the
Ten Year Premium
Payment Rider

[Discounts] This will only print if at least one discount is being applied to the premium

[Spousal Discount Rider] This will only print if the Spousal discount is being applied to the premium.

-\$[637.50] This is the
Spousal Discount
amount

-\$[637.50] This is the
Marital Discount
amount

[Marital Discount] This will only print if the Marital Discount is being applied to the premium

-\$[637.50] This is the
Residential Discount
amount

[Residential Discount] This will only print if the Residential Discount is being applied to the premium

-\$[637.50] This is the
Preferred Discount
amount

[Preferred Discount] This will only print if the Preferred Discount is being applied to the premium

[Multi-Life Discount] This will only print if the Multi-Life Discount is being applied to the premium

-\$[100.00] This is the
Multi-Life Discount
amount

Total Initial Annual Premium[(with Discounts)]^[3]“(with Discounts)” will only print if at least one discount is being applied to the premium. The superscript number that is at the end of this line is dependant on whether the Cash Benefit Rider and the Ten Year Premium rider have been selected. If both were selected then this number should be “3”, if only one of the two have been selected this number should be a “2”, and if neither have been selected then this number should be a “1”

\$[1,487.50] This is
the Total Initial
Annual Premium with
any discounts
applied to it.

[Monthly] This is the payment mode selected Modal Premium Amount

\$[1,560.00] This is
the modal premium
amount

[Total Annual Premium On and After 10th Policy Anniversary]^[2] This will only print if the Ten Year Premium Payment Rider has been selected, the number that follows this line will be the same number that prints after the Ten Year Premium Payment Rider line above.

\$[0.00] This will only
print if the Ten Year
Premium Payment
Rider has been
selected, this value
will always be \$0.00

Split Billing Method:

[Core Method] This will only print if a Core Method Split Billing plan is being illustrated

[Core benefits listed are employer
paid.] This will only print if a Core Method
Split Billing plan has been selected

[Employer Contribution,] This will only print if either Dollar Amount Method or Percent Method has been selected

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

as the Split Billing method.

[Dollar Amount Method] This will only print if the Dollar Amount Method has been selected as the Split Billing Method

[\$1,111.11] This is the Employers Dollar Amount Contribution [Monthly] This is the Employers payment mode

[Percent Method] This will only print if the Percent Method has been selected as the Split Billing method

[50.00%] This is the percent of the premium that the employer is willing to pay.

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [6]]. Bracketed text will only print if the Policy Feature, Optional Rider, and Discount Explanations section is being included with the illustration, the page number that prints will be the page that this section of the output begins.

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.] This will only print if this is a Partnership Plan

[¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.] This will only print if the Cash Benefit Rider has been selected.

[²] If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.] This will only print if the Ten Year Premium Payment Rider has been selected. The superscript number that begins this line is dependant on whether the Cash Benefit Rider has been selected, if it has then this number will be "2", if it has not then this number will be "1".

[³] Please note that there is an additional cost if you pay premium more frequently than annually. The superscript number that begins this line is dependant on the selection of the Cash Benefit Rider and the Ten Year Premium Payment Rider. If both have been selected this number will be "3", if only one has been selected then this number will be "2", and if neither have been selected then this number will be "1".

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly]This is the payment mode selected for the Employer Premiums	Insured's Initial [Monthly]This is the payment mode selected for the Employee Premiums
Base Coverage	See above	\$[XXX.XX]This is the amount the Employer will pay for the Base Coverage	\$[XXX.XX]This is the amount the Employee will pay for the Base Coverage
Benefit Increase Option	[Guaranteed Purchase Option Rider]This is the Benefit Increase Option selected in the GUI	\$[XX.XX]This is the amount the Employer will pay for the Benefit Increase Option	\$[XX.XX]This is the amount the Employee will pay for the Benefit Increase Option
[Shared Care Rider]This row will only print if the Shared Care Rider has been selected	[Yes]This will only print if the Shared Care Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Shared Care Rider	\$[XX.XX]This is the amount the Employee will pay for the Shared Care Rider
[Nonforfeiture Coverage Rider]This row will print if the Nonforfeiture Coverage Rider has been selected	[Yes]This will only print if the Nonforfeiture Coverage Rider has been selected	\$[XX.XX]This is the amount that the Employer will pay for the Nonforfeiture Coverage Rider	\$[XX.XX]This is the amount that the Employee will pay for the Nonforfeiture Coverage Rider
[Cash Benefit Rider ^[1]]This row will only print if the Cash Benefit Rider has been selected.	[Yes]This will only print if the Cash Benefit Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Cash Benefit Rider	\$[XX.XX]This is the amount the Employee will pay for the Cash Benefit Rider
Total Modal Premium[(with Discounts)](with discounts)" will only print if there is at least one discount being applied to the policy		\$[XXX.XX]*This is the Employers Total Modal Premium amount	\$[XXX.XX]*This is the Employees Total Modal Premium amount

Employer Paid Portion is capped at \$[XXX.XX]This is the maximum the Employer will pay per year for the plan.
Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the premium for the policy.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

[This entire page will only print if there is a Spouse/Resident on the policy]

Your [Plan Name] <small>This is the name of the plan being illustrated</small> illustration at a glance	
Policy Benefits	Initial Annual Premium
Total Benefit Amount	\$[400,000] <small>This is the total benefit amount selected</small> \$[750.00] <small>This is the premium for the total and monthly benefit</small>
Monthly Benefit Amount	\$[6,000] <small>This is the monthly benefit amount selected</small>
[Partnership*] <small>This will only print if the plan is a partnership plan</small>	[yes] <small>This will only print if the plan is a partnership plan</small>

Every MetLife [LTC LifeStage Advantage] This is the name of the product being illustrated policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge. Please note that coverage is reimbursed at 100%

Built In Benefits

Return of Premium	Bed Reservation
Policy Waiver of Premium	Needs Assessment
International Coverage	Care Advisory Services
Hospice Facility/Hospice Care at Home	

Elimination Period	[100] <small>This is the number of days in the elimination period</small> Calendar Days
--------------------	---

[Benefit Increase Option] This will only print if a Benefit Increase Option has been selected

[Guaranteed Purchase Option Rider] <small>This will only print if the GPO has been selected</small>	\$[975.00] <small>This is the premium for the GPO</small>
---	---

[Optional Benefits] This will only print if at least one optional benefit has been selected

[Shared Care Rider] <small>This will only print if the Shared Care Rider has been selected</small>	\$[100.00] <small>This is the premium for the Shared Care Rider.</small>
[Nonforfeiture Coverage Rider] <small>This will only print if the Nonforfeiture Rider has been selected.</small>	\$[100.00] <small>This is the premium for the nonforfeiture rider</small>
[Cash Benefit Rider] ^[1] <small>This will only print if the Cash Benefit Rider has been selected</small>	\$[100.00] <small>This is the premium for the Cash Benefit Rider</small>

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Ten Year Premium Payment Rider]^[2] This will only print if the Ten Year Premium Payment Rider has been selected. The superscript number at the end of this line depends on whether the Cash Benefit Rider has been selected, if it has then this number will be a "2", if not then this number will be a "1".

\$[1,487.50] This is the premium for the Ten Year Premium Payment Rider

[Discounts] This will only print if at least one discount is being applied to the premium

[Spousal Discount Rider] This will only print if the Spousal discount is being applied to the premium. -\$[637.50] This is the Spousal Discount amount

[Marital Discount] This will only print if the Marital Discount is being applied to the premium -\$[637.50] This is the Marital Discount amount

[Residential Discount] This will only print if the Residential Discount is being applied to the premium -\$[637.50] This is the Residential Discount amount

[Preferred Discount] This will only print if the Preferred Discount is being applied to the premium -\$[637.50] This is the Preferred Discount amount

[Multi-Life Discount] This will only print if the Multi-Life Discount is being applied to the premium -\$[100.00] This is the Multi-Life Discount amount

Total Initial Annual Premium [(with Discounts)]^[3] "(with Discounts)" will only print if at least one discount is being applied to the premium. The superscript number that is at the end of this line is dependant on whether the Cash Benefit Rider and the Ten Year Premium rider have been selected. If both were selected then this number should be "3", if only one of the two have been selected this number should be a "2", and if neither have been selected then this number should be a "1"

\$[1,487.50] This is the Total Initial Annual Premium with any discounts applied to it.

[Monthly] This is the payment mode selected Modal Premium Amount \$[1,560.00] This is the modal premium amount

[Total Annual Premium On and After 10th Policy Anniversary]^[2] This will only print if the Ten Year Premium Payment Rider has been selected, the number that follows this line will be the same number that prints after the Ten Year Premium Payment Rider line above. \$[0.00] This will only print if the Ten Year Premium Payment Rider has been selected, this value will always be \$0.00

Split Billing Method:

[Core Method] This will only print if a Core Method Split Billing plan is being illustrated [Core benefits listed are employer paid.] This will only print if a Core Method Split Billing plan has been selected

[Employer Contribution,] This will only print if either Dollar Amount Method or Percent Method has been selected

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

as the Split Billing method.

[Dollar Amount Method] This will only print if the Dollar Amount Method has been selected as the Split Billing Method

[\$1,111.11] This is the Employers Dollar Amount Contribution [Monthly] This is the Employers payment mode

[Percent Method] This will only print if the Percent Method has been selected as the Split Billing method

[50.00%] This is the percent of the premium that the employer is willing to pay.

For further information regarding the benefits above please refer to the "Outline of Coverage" provided with this proposal[and the descriptions on page [6]]. Bracketed text will only print if the Policy Feature, Optional Rider, and Discount Explanations section is being included with the illustration, the page number that prints will be the page that this section of the output begins.

[*Please note: If you make a change to your Benefit Increase Option, you may change the partnership status of this policy.] This will only print if this is a Partnership Plan

[¹] Since benefits under this rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludable amount, proceeds from all sources of long-term care reimbursement (e.g. other policies and Medicare) must be aggregated.] This will only print if the Cash Benefit Rider has been selected.

[²] If your policy includes the 10 Year Premium Payment Rider, as of your 10th Policy Anniversary, the Coverage in effect on your Original Effective Date will be paid-up. Any increase in premium resulting from a change in Coverage after your Original Effective Date will not be paid-up until 10 Policy Years from the effective date of the change. Please note that no increase in coverage is permitted after the Policy is paid up. This rider may impact the tax-deductibility of your premium. Please consult your tax advisor for further clarification.] This will only print if the Ten Year Premium Payment Rider has been selected. The superscript number that begins this line is dependant on whether the Cash Benefit Rider has been selected, if it has then this number will be "2", if it has not then this number will be "1".

[³] Please note that there is an additional cost if you pay premium more frequently than annually. The superscript number that begins this line is dependant on the selection of the Cash Benefit Rider and the Ten Year Premium Payment Rider. If both have been selected this number will be "3", if only one has been selected then this number will be "2", and if neither have been selected then this number will be "1".

]

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

This entire page will only print if there is a Spouse/Resident on the policy.

[Benefits and Premium Detail

Benefits	Plan Coverage	Employers Initial [Monthly]This is the payment mode selected for the Employer Premiums	Insured's Initial [Monthly]This is the payment mode selected for the Employee Premiums
Base Coverage	See above	\$[XXX.XX]This is the amount the Employer will pay for the Base Coverage	\$[XXX.XX]This is the amount the Employee will pay for the Base Coverage
Benefit Increase Option	[Guaranteed Purchase Option Rider]This is the Benefit Increase Option selected in the GUI	\$[XX.XX]This is the amount the Employer will pay for the Benefit Increase Option	\$[XX.XX]This is the amount the Employee will pay for the Benefit Increase Option
[Shared Care Rider]This row will only print if the Shared Care Rider has been selected	[Yes]This will only print if the Shared Care Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Shared Care Rider	\$[XX.XX]This is the amount the Employee will pay for the Shared Care Rider
[Nonforfeiture Coverage Rider]This row will print if the Nonforfeiture Coverage Rider has been selected	[Yes]This will only print if the Nonforfeiture Coverage Rider has been selected	\$[XX.XX]This is the amount that the Employer will pay for the Nonforfeiture Coverage Rider	\$[XX.XX]This is the amount that the Employee will pay for the Nonforfeiture Coverage Rider
[Cash Benefit Rider ^[1]]This row will only print if the Cash Benefit Rider has been selected.	[Yes]This will only print if the Cash Benefit Rider has been selected	\$[XX.XX]This is the amount the Employer will pay for the Cash Benefit Rider	\$[XX.XX]This is the amount the Employee will pay for the Cash Benefit Rider
Total Modal Premium[(with Discounts)]"(with discounts)" will only print if there is at least one discount being applied to the policy		\$[XXX.XX]*This is the Employers Total Modal Premium amount	\$[XXX.XX]*This is the Employees Total Modal Premium amount

Employer Paid Portion is capped at \$[XXX.XX]This is the maximum the Employer will pay per year for the plan.
Annual.

*The insured will be responsible for the total premium amount in the event the employer ceases to contribute toward the
premium for the policy.

]

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
	Total Initial Annual Premium: \$[1,487.50]

Proposed Total Initial Premium

	Annual	Semi-Annual	Quarterly	Monthly
[Insured1] The client's name will print here	\$[1,387.50]This is the total Annual premium for the client	\$[705.00]This is the total semi-annual premium for the Client	\$[355.00]This is the total Quarterly premium for the Client	\$[125.00]This is the total Monthly premium for the Client
[Insured2] The Spouse/Resident's name will print here if one has been entered in the GUI	\$[1,387.50]This is the total Annual premium for the Spouse/Resident	\$[705.00]This is the total semi-annual premium for the Spouse/Resident	\$[355.00]This is the total Quarterly premium for the Spouse/Resident	\$[125.00]This is the total Monthly premium for the Spouse/Resident
[Both Insureds] This entire line will only print if there is a Spouse/Resident on the policy	\$[2,775.00]This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[1,410.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[710.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy	\$[250.00] This cell contains the sum of the two cells above it and does not print unless there is a Spouse/Resident on the policy
Annualized Total Initial Premium	\$[2,775.00]This is the total annualized premium for the Annual payment mode for everyone on the illustration	\$[2,820.00]This is the total annualized premium for the Semi-Annual payment mode for everyone on the illustration	\$[2,840.00]This is the total annualized premium for the Quarterly payment mode for everyone on the illustration	\$[3,000.00]This is the total annualized premium for the Monthly payment mode for everyone on the illustration.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

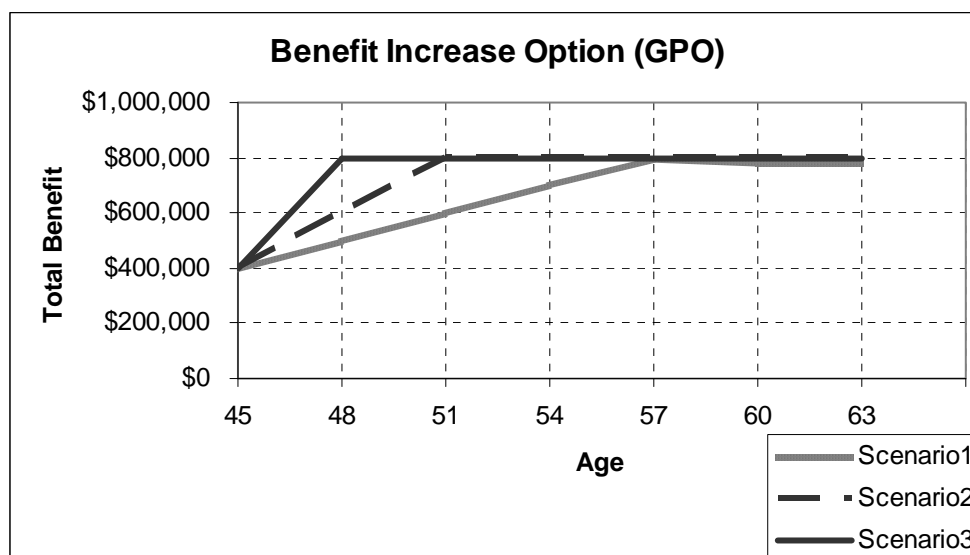
This page will only print if the GPO has been selected, if it has been selected for both the Client and the Spouse/Resident then
this page will print one time for the Client and one time for the Spouse

[Guaranteed Purchase Option (GPO) Rider Comparison]

To help you understand how the Guaranteed Purchase Option (GPO) Rider works, the table and graph below illustrate three possible scenarios for how you might choose to use the GPO*. Each scenario shows how your Monthly Benefit, Total Benefit Amount, and Premiums** would be affected. Scenario 1 assumes that a 25% increase is applied on the 3rd, 6th, 9th and 12th policy anniversaries, Scenario 2 assumes that a 50% increase is applied on the 3rd and 6th policy anniversaries, while Scenario 3 assumes a one-time 100% increase on the 3rd policy anniversary.

Age	GPO Scenario 1			GPO Scenario 2			GPO Scenario 3		
	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium	Monthly Benefit	Total Benefit Amount	Premium
[45]	\$[6,000]	\$[400,000]	\$[1,800]	\$[6,000]	\$[400,000]	\$[1,800]	\$[6,000]	\$[400,000]	\$[1,800]
[48]	\$[7,500]	\$[500,000]	\$[2,250]	\$[9,000]	\$[600,000]	\$[2,700]	\$[12,000]	\$[800,000]	\$[3,600]
[51]	\$[9,000]	\$[600,000]	\$[2,812]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[54]	\$[10,500]	\$[700,000]	\$[3,516]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[57]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[60]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]
[63]	\$[12,000]	\$[800,000]	\$[4,395]	\$[12,000]	\$[800,000]	\$[3,375]	\$[12,000]	\$[800,000]	\$[3,600]

The table above illustrates how the GPO can inflate the Benefit Amounts under 3 different scenario's. Premium is shown for each year shown. The graph below plots the Total Benefit Amount for each year shown in each scenario.



*Under the GPO any increase must be at least 25% and the total of all increases may not exceed 100% of your initial total benefit amount.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
	Total Initial Annual Premium: \$[1,487.50]

**Illustration of Future Premium assumes no increase in rates]

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

This page will only print if the user has not selected to exclude the Policy Feature, Optional Rider, and Discounts Explanations section

[Policy Feature, Optional Rider, and Discounts Explanations]

This is a summary of the features, optional riders and discounts available under the MetLife [LTC LifeStage Advantage] policy. Please refer to your Outline of Coverage for complete details.

Built In Benefits
Every MetLife [LTC LifeStage Advantage] This is the name of the policy being illustrated. policy includes coverage for home care, assisted living facility, nursing home and adult day care. In addition, the following Built-In Benefits are also included for no additional charge.
Return of Premium
If you die on or before your 70 th birthday, we will return to your designated beneficiary an amount equal to all the premiums that you paid, less any Benefits that were paid to you or on your behalf.
Waiver of Premium
If you are in the United States and you become eligible for benefits, fulfill the applicable elimination period and begin receiving payment of benefits, we will waive your premiums ..
International Benefit
If you are living outside the United States for at least 15 consecutive days during a calendar month, are eligible for benefits and have fulfilled the applicable elimination period for the international benefit, you can receive benefits under the International Benefit provision in your policy.
Care Advisory Services
This policy provides for care advisory services provided by a care advisor. This includes any of the following services: assessing long-term care service needs; identifying the long-term care providers to meet those needs; requisitioning and coordinating long-term care services; implementing the long-term care service plan; and monitoring and reassessing long-term care needs as required from time to time.
Bed Reservation
If you are in a nursing home, hospice facility or assisted living facility, and you leave the facility temporarily, we will pay benefits for the actual charges you incur to hold your space in the facility so that you are able to return to it.
Needs Assessment
After you become eligible for benefits, you can receive one needs assessment from a care management organization to assess your long-term care service needs.
Hospice Facility/Hospice Care at Home
This policy provides coverage for hospice care, either in a hospice facility or at home, if you become terminally ill.
Elimination Period for Covered Services
This policy includes a [100] calendar day elimination period for covered services This is the number of days you must be eligible for benefits before benefits for covered services become payable. These [100] calendar days do not need to be consecutive.

MetLife®

[LTC2007 Product Name]

[Sample Insured]	Age: [45], [Standard]
[Sample Insured2]	[Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Benefit Increase Option]	This line will only print if a Benefit Increase Option has been selected for at least one person on this illustration
[Guaranteed Purchase Option Rider]	This will only print if the GPO has been selected for at least one person on this illustration
	[As often as every 3 years, purchase an increase in coverage without providing proof of good health. Total purchases may be up to 100% of your original total benefit amount.] This will only print if the GPO has been selected for at least one person on this illustration
[Optional Benefits]	This line will only print if at least one Optional Benefit has been selected for at least one person on this illustration.
[Shared Care Rider]	This will only print if the Shared Care Rider has been selected for at least one person on this illustration.
	[If your spouse or domestic partner (referred to as "covered partner") is covered under a policy that is identical to yours that includes the Shared Care Rider, and your covered partner exhausts the total benefit amount under his/her policy, then your covered partner may receive benefits (other than the benefit for needs assessment) under your policy without satisfying any additional elimination period. In the event of your covered partner's death, the remaining total benefit amount under his/her policy will be added to your policy.] This will only print if the Shared Care Rider has been selected for at least one person on this illustration.
[Nonforfeiture Rider]	This will only print if the Nonforfeiture Rider has been selected for at least one person on this illustration
	[If your policy ends due to nonpayment of premium or your written request to cancel the policy, we will convert your policy to "paid-up" status with limited benefits, provided this rider has been in effect for at least three years and is in effect at the time your policy ends. As a "paid-up" policy, your total benefit amount will be adjusted so that it is equal to the greater of: the total amount of the premium you had paid for your policy while the rider was in effect; or the monthly benefit amount.] This will only print if the Nonforfeiture Rider has been selected for at least one person on this illustration
[Cash Benefit Rider]	This will only print if the Cash Benefit Rider has been selected for at least one person on this illustration
	[With this rider, if you are eligible for benefits and have fulfilled the elimination period, you will receive the monthly benefit amount instead of reimbursement for covered services (other than the needs assessment). Benefits under this rider will be paid up to the total benefit amount. Since benefits under the Cash Benefit Rider will be paid without regard to actual charges incurred, the benefits which exceed limitations prescribed by the Internal Revenue Code could be considered income. In determining the excludible amount, proceeds from all sources of long term care reimbursement (e.g. other policies and Medicare) must be aggregated.] This will only print if the Cash Benefit Rider has been selected for at least one person on this illustration
[Ten Year Premium Payment Rider]	This will only print if the Ten Year Premium Payment Rider has been selected for at least one person on this illustration.
	[With this rider, once you have paid premiums up to your 10 th policy anniversary, the coverage that went into effect on your original policy effective date will be considered "paid-up" and will remain in effect with no further premium payment. Once the policy is "paid-up" under this rider, you may not request any further changes to your policy. If you end this rider before it is paid-up, and your policy remains in force, you will not receive any offset, adjustment or refund of the accelerated premium paid under this rider upon switching to the standard method of premium payment. The Ten-Year Premium Payment Rider provides an accelerated premium payment schedule. Please be aware that the payment of premiums more rapidly than under a standard payment plan may result in a loss of potential tax deductions to which you may otherwise be entitled under the federal income tax law and the income tax laws of certain states. You should consult your tax advisor prior to selecting an accelerated premium payment rider.] This will only print if the Ten Year Premium Payment Rider has been selected for at least one person on this illustration.

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]
Total Initial Annual Premium: \$[1,487.50]	

[Discounts]	This line will only print if at least one discount has been selected for at least one person on this illustration
[Spousal Discount Rider]	This will only print if the Spousal Discount Rider has been selected for at least one person on this illustration
	[Premiums for your coverage will be subject to a [30]This is the discount percentage for the Spousal Discount Rider% spousal discount if your spouse or domestic partner is insured under an individual long-term care insurance policy issued by MetLife. The discount will apply to premium due after the latest of: your policy's original effective date; the date your spouse's or domestic partner's policy initially became effective; or the date we are notified of your eligibility for this discount. If your spouse's or domestic partner's coverage ends for any reason other than his/her death or the exhaustion of the total benefit amount under his/her policy, so will this discount.] This will only print if the Spousal Discount Rider has been selected for at least one person on this illustration
[Marital Discount]	This will only print if the Marital Discount has been selected for at least one person on this illustration
	[If you are married or have a domestic partner and do not qualify for the spousal discount, you will be entitled to a [15]This is the percentage for the marital discount% marital discount. The discount will apply to all premiums due after the latest of your policy's original effective date or the date we were notified of your eligibility for this discount.] This will only print if the Marital Discount has been selected for at least one person on this illustration
[Residential Discount]	This will only print if the Residential Discount has been selected for at least one person on this illustration
	[If a household member is insured under an individual long-term care insurance policy issued by MetLife, you will be eligible for this [15]This is the percentage for the Residential Discount% discount. This discount will apply to all premiums due and payable on or after the latest of your policy's original effective date, the date the household member's coverage initially became effective, or the date we were notified of your eligibility for this discount. (This discount may not be combined with spousal or marital discount.)] This will only print if the Residential Discount has been selected for at least one person on this illustration
[Preferred Discount]	This will only print if the Preferred Discount has been selected for at least one person on this illustration
	[Applicants who meet specific medical underwriting criteria will receive a preferred rating. If you qualify for our preferred health rating, you will receive a [10]This is the percentage for the Preferred Discount% discount on your premiums.] This will only print if the Preferred Discount has been selected for at least one person on this illustration
[Multi-Life Discount]	This will only print if the Multi-Life discount has been selected for at least one person on this illustration
	[Employer Paid – [5]This is the percentage for the discount% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the 5% Employer Paid Discount has been selected for at least one person on this illustration
	[Employer Paid – [10]This is the percentage for the discount% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the Employer Paid 10% discount has been selected for at least one person on this illustration
	[Voluntary Paid – [5]This is the percentage for the discount% - This discount is available to employees of an employer or members of an association where the employer or association has entered into a multi-life agreement with us. This discount may also be available to family members of the employee or member to whom the multi-life arrangement applies.]This will only print if the Voluntary Paid 5% discount has been selected for at least one person on the illustration

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

This will only print if illustrating a Partnership policy

[The [State] This is the state selected for the partnership Long-Term Care Insurance Partnership Program

Some long-term care insurance policies sold in [State] This is the state selected for the partnership qualify for the [State] This is the state selected for the partnership Long-Term Care Insurance Partnership Program. This Partnership Program is a partnership between state government and private insurance companies to assist individuals in planning for their long-term care needs. Individuals who purchase long-term care insurance policies that qualify as Partnership Policies may receive special treatment protecting their assets through a feature known as "Asset Disregard," under [State's] This is the state selected for the partnership Medicaid program.

Asset Disregard means that an amount of the policyholder's assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured's eligibility for Medicaid after the policy benefits are exhausted. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person's eligibility for Medicaid. Asset Disregard is **not** available under a long-term care insurance policy that is not a Partnership Policy.

MetLife's individual long-term care insurance policies may now be offered to [State] This is the state selected for the partnership residents as [State] This is the state selected for the partnership Partnership Policies.

Currently, in order for a MetLife policy to be a Partnership Policy, the policy must meet the following requirements for inflation protection on its initial effective date:

[Insert State Specific Requirements] State specific requirements for the partnership program will print here

What Could Disqualify a Policy as a Partnership Policy?

Certain types of changes to a Partnership Policy could affect whether or not the policy continues to be a Partnership Policy. If a Partnership Policy is purchased and later changes are desired, the insured should first consult with us to determine the effect of a proposed change.. In addition, if the insured moves to a State that does not maintain a Partnership Program or does not recognize the policy as a Partnership Policy, the insured would not receive beneficial treatment of the policy under the Medicaid program of that State.

[The information stated above is based on current [State] This is the state selected for the partnership and Federal laws. These laws may be subject to change. If there are any questions regarding current laws governing Medicaid eligibility, please contact the [State] This is the state selected for the partnership Department of Health and Welfare.]

]

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

Limitations & Exclusions

There are times when MetLife WILL NOT PAY BENEFITS under the proposed policy. These are known as "LIMITATIONS & EXCLUSIONS" and they VARY BY STATE.

Below are the "LIMITATIONS & EXCLUSIONS" that are applicable in most states. For the "LIMITATIONS & EXCLUSIONS" that are applicable in your state, refer to the "OUTLINE OF COVERAGE" that will be given to you with this proposal.

What is Not Covered Under this Policy

[No payment will be made for any of the following:] **This will only print if the Cash Benefit Rider has not been selected**

- [treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a Physician;] **This will only print if the Cash Benefit Rider has not been selected**
- [any care received while in a Hospital, except in a unit specifically designated and licensed as a Nursing Home or Hospice Facility;] **This will only print if the Cash Benefit Rider has not been selected**
- [any injury or sickness that results from:
 - any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;] **This will only print if the Cash Benefit Rider has not been selected**
- [services performed at home by a member of your Immediate Family, unless: (a) he or she is a regular employee of a home care agency which is providing services to you; (b) the home care agency receives payment for the services; and (c) he or she receives no compensation other than the normal compensation for employees of that home care agency;] **This will only print if the Cash Benefit Rider has not been selected**
- [any care or services received outside of the United States, except as described in the International Coverage section;] **This will only print if the Cash Benefit Rider has not been selected**
- [any service or item to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or co-payment amount. This exclusion will not apply where Medicare is secondary payer under applicable law or to Benefits paid under the International Benefit section;] **This will only print if the Cash Benefit Rider has not been selected**
- [treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or] **This will only print if the Cash Benefit Rider has not been selected**
- [services for which no charge is normally made in the absence of insurance.] **This will only print if the Cash Benefit Rider has not been selected**

[Non-Duplication of Benefits

To the extent permitted by applicable law, we will reduce the benefits that we will pay for covered services to the extent that the combination of benefits paid under this policy and amounts paid or payable for those services by any of the following exceed 100% of the actual charge for the covered services:

- any medical insurance policy;
- any state or federal workers' compensation law or similar law;
- any employer's liability or occupational disease law; or

MetLife®

[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

- any motor vehicle no-fault law.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has not been selected](#)

[Coordination With Other MetLife Coverages]

If you have more than one long-term care insurance policy or certificate insured by MetLife, to the extent permitted by applicable law, we will reduce benefits payable under this policy to the extent necessary, so that the combination of amounts paid or payable under all of the policies and certificates issued by MetLife will not exceed 100% of the actual charges for covered services. If you are eligible to receive benefits under this policy, and any other long-term care policy or certificate insured by MetLife that has a coordination of benefits provision:

- the policy or certificate with the earliest effective date will be deemed to be the primary coverage; and
- any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest.

Policies and certificates without a coordination of benefits provision will pay first.

This provision does not apply to policies or certificates which pay benefits without regard to actual charges you incur.] [This will only print if the Cash Benefit Rider has not been selected](#)

[If you select the Cash Benefit Rider, the following exclusions apply:

No payment will be made for any injury or sickness that results from:

- any war, or act of war (whether declared or undeclared);
 - participation in a felony, riot or insurrection; or
 - any intentionally self-inflicted injury;]
- [This will only print if the Cash Benefit Rider has been selected](#)

Alzheimer's Disease and other organic brain disorders – If your application is approved and a policy issued, coverage is provided for these conditions subject to the requirements and provisions of the policy.

Subject to state availability, Metropolitan Life Insurance Company ("MetLife") individual Long-Term Care ("LTC") Insurance coverage is offered by policy #LTC2007. In some states, these identifiers may be followed by the state's 2-letter abbreviation; "ML" for Multi-Life; and/or "P" for Partnership policies.

MetLife's LTC Insurance policies are guaranteed renewable and, like most LTC insurance policies cannot be cancelled due to an increase in your age or a change in your health. Premium rates can be raised as the result of a rate increase made on a class basis. Like most LTC Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. Ask me about complete costs and details.

No part of the *Peanuts* material may be copied, reproduced, used, or performed in any form (graphic, electronic, or mechanical, including photocopying, recording, taping or information storage and retrieval systems) for any purpose without the express written permission of United Features Syndicate, Inc.

The information contained in this document is not intended to (and cannot) be used by anyone to avoid IRS penalties. This document supports the promotion and marketing of this long term care. You should seek advice based on your particular circumstances from an independent tax advisor.

MetLife, its agents, and representatives may not give legal or tax advice. Any discussion of taxes herein or related to this document is for general information purposes only and does not purport to be complete or cover every situation. Tax law is subject

MetLife®
[LTC2007 Product Name]

[Sample Insured] [Sample Insured2]	Age: [45], [Standard] [Age:][45][,][Standard]	
	Total Initial Annual Premium: \$[1,487.50]	

to interpretation and legislative change. Tax results and the appropriateness of any product for any specific taxpayer may vary depending on the facts and circumstances. You should consult with and rely on your own independent legal and tax advisers regarding your particular sets of facts and circumstances.

Metropolitan Life Insurance Company
57 Greens Farms Road, Westport, CT 06880
Tel 203 221-3859 Fax 203 221-6573
Mrinaldi@metlife.com

MetLife®

Mary J. Rinaldi
Long-Term Care

February 22, 2008

Commissioner of Insurance
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

Re: Filing No. I07-39 2B
Metropolitan Life Insurance Company ("MetLife")
Individual Long-Term Care Insurance Advertising
NAIC Company No. 65978 - FEIN 13-5581829

Dear Sir/Madam:

We enclose for filing electronic copies of the Individual long-term care advertising materials described below. The materials are intended for use with the following approved Individual long-term care policy form LTC2007 AR approved on August 17, 2007.

The advertising materials are new and do **not** replace any materials previously filed with your Department.

Advertising Form Number	Brief Description of Invitation to Inquire Advertising Material
ADF#1815.07	Multi-Life Split Billing Output - LifeStage Advantage
ADF#1817.07	Starter Split Billing Output - LifeStage Advantage
ADF#1816.07	Custom Split Billing Output - LifeStage Advantage

Variable material will be modified in accordance with the enclosed Explanation of Variables.

The NAIC form is enclosed and the filing fee check has been mailed to your Department.

Please advise us of your action on this submission in accordance with your usual procedures.

If you have any questions or comments, please do not hesitate to contact me.

Sincerely,



Mary J. Rinaldi
Consultant-Compliance Marketing/AD

Life, Accident & Health, Annuity, Credit Transmittal Document

Reset Form

1.	Prepared for the State of	ARKANSAS					
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2.	Department Use Only						
	State Tracking ID						

3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #	STATE #
	Metropolitan Life Insurance Company Long-Term Care Insurance Division 57 Greens Farms Road Westport, CT 06881-9909	New York	A&H	241	65978	13-5581829	

4.	Contact Name & Address	Telephone #	Fax #	E-mail Address
	Mary J. Rinaldi Metropolitan Life Insurance Company Long-Term Care Insurance Division 57 Greens Farms Road Westport, CT 06881-9909	203.221.3859	203.221.6573	mrinaldi@metlife.com

5.	Requested Filing Mode	<input checked="" type="checkbox"/> Review & Approval <input type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____
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6.	Company Tracking Number: I07-38 2B Advertising Form: ADF#1815.07 et al	
7.	<input checked="" type="checkbox"/> New Submission <input type="checkbox"/> Resubmission <input type="checkbox"/> Previous file #	

8.	Market	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Franchise <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">Group</div> <div> <input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Small and Large <input type="checkbox"/> Employer <input type="checkbox"/> Association <input type="checkbox"/> Blanket <input type="checkbox"/> Discretionary <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____ </div> </div>
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9.	Type of Insurance	LTC031 Individual Long-Term Care Insurance
10.	Product Coding Matrix Matix Filing Code	LTC031.001 - Qualified

11.	Submitted Documents	<input type="checkbox"/> FORMS <input type="checkbox"/> Policy <input type="checkbox"/> Outline of Coverage <input type="checkbox"/> Certificate <input type="checkbox"/> Application <input type="checkbox"/> Rider/Endorsement <input checked="" type="checkbox"/> Advertising <input type="checkbox"/> Schedule of Benefits <input type="checkbox"/> Other <input type="checkbox"/> RATES <input type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate <input type="checkbox"/> FILING OTHER THAN FORM OR RATES: _____ Please explain: SUPPORTING DOCUMENTATION <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Third Party Authorization <input type="checkbox"/> Association Bylaws <input type="checkbox"/> Trust Agreements <input type="checkbox"/> Statement of Variability <input type="checkbox"/> Certifications <input type="checkbox"/> Actuarial Memorandum <input type="checkbox"/> Other: _____
12.	Filing Submission Date	February 22, 2008
13.	Filing Fee (If required)	Amount \$ 75.00 . _____ Check Date February 15, 2008 Retaliatory <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Check Number 000895693
14.	Date of Domiciliary Approval	NA New York does not require LTCI advertising to be filed.
15.	Filing Description:	INDIVIDUAL LONG-TERM CARE INSURANCE ADVERTISING MATERIAL(S)
	PLEASE SEE COVER LETTER	

View Complete Filing Description

16.	Certification (If required)	
I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and complies with all applicable statutory provisions for the state of <u>ARKANSAS</u>		
Print Name <u>Mary J. Rinaldi</u>		Title: <u>Consultant-Compliance/Marketing/AD</u>
Original Signature <u><i>Mary J. Rinaldi</i></u>		Date <u>February 22, 2008</u>

17.	Form Filing Attachment	
This filing transmittal is part of company tracking number		I07-39 2B
This filing corresponds to rate filing company tracking number		

	Document Name	Form Number		Replace Form Number
	Description			Previous State Filing Number
01	Multi-Life Split Billing Output - LifeStage Advantage	ADF#1815.07	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
02	Starter Split Billing Output - LifeStage Advantage	ADF#1817.07	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
03	Custom Split Billing Output - LifeStage Advantage	ADF#1816.07	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
04			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
05			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
06			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
07			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
08			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
09			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
10			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
11			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
12			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	

LH FFA-1

18.		Rate Filing Attachment		
This filing transmittal is part of company tracking number				
This filing corresponds to form filing company tracking number				
Overall percentage rate impact for this filing		%		
	Document Name	Affected Form Numbers		Previous State Filing Number
	Description			
01			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	

LH RFA-1